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TO:	Registration Section Division of Corporation	ns			•	
SUBJI	Ideal Development (Concepts, LLC				
		Name of	Limited Liability (Company	<u> </u>	
					onsact Business in Florida," Certificate y company to transact business in Flori	
Please	return all correspondence of	concerning this matter to the	following:			
	Catherine Dom	onousky				
	Name of Person					
	Ideal Development Concepts, LLC					
	Firm/Company					
	3374 Lawrenceville Suwanee RD.					
	Address					
	Suwanec, GA. 30024					
	City/State and Zip Code					
	hr@ide247.com					
	E-mail address: (to be used for future annual report notification)					
For fu	rther information concerning	g this matter, please call:			1	
	Catherine Domonousky		678 at (546-04	48	
	Name o	Area Code	Day	rtime Telephone Number		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclos	sed is a check for the follow ☐ \$125.00 Filing Fee	ing amount; ■ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filit Certified Copy	ng Fee &	☐ \$160.00 Filing Fee. Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1 Ideal Development Concepts (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L. L. C." or "L1.C.") 3. 58-2401640 2. Georgia (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) 09/15/2017 (Date first transacted business in Florida, if prior to registration.) (See sections 605 0904 & 605 0905, F.S. to determine penalty liability) 6 3374 Lawrenceville Suwanee Road 3374 Lawrenceville Suwanee Road (Street Address of Principal Office) (Mailing Address) Suwance, GA 30024 Suwance, GA, 30024 7. Name and street address of Florida registered agent; (P.O. Box NOT acceptable) Mike Jarrett Name: 33 A Lake Arrowhead Drive Office Address: Winter Haven Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. Michael A. Livett
[Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Business Manager Brad Domonousky **CFO** Jim Curry 3374 Lawrenceville Suwanee 1 3374 Lawrenceville Suwance Suwance, GA. 30024 Suwance, GA 30024 COO Jeff Anderson President Frank Domonousky 3374 Lawrenceville Suwanee 3374 Lawrenceville Suwanee 1 Suwance, GA, 30024 Suwanee, GA 30024 (Use attachments if necessary) 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$,817,155, F.S. mature of an authorized person

Typed or printed name of signee

Brad Domonousky

Control Number: K801969

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, **Brian P. Kemp**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

IDEAL DEVELOPMENT CONCEPTS, L.L.C.

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued! It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 14910066
Date Inc/Auth/Filed: 01/12/1998
Jurisdiction : Georgia
Print Date : 09/22/2017

Form Number : 211



B: P. Kemp