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			(Requestor's Name)	
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l			(City/State/Zip/Phone #)	
		] PICK-	UP WAIT MAIL	
			(Business Entity Name)	
			(Document Number)	
Certifi	ed	Copies	Certificates of Status	
Spe	c al	Instruction	ors to Filing Officer:	
		1	Office Use Only	
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·{{ }	Co	VER LETTER	
	sistration Section ision of Corporations		
SUBJECT:	Five Daughters Bakery 30A, LLC		ı,
<b>[]</b>	Name of	Limited Liability Company	
	I "Application by Foreign Limited Liability Com nd check are submitted to register the above refer		
Please return	all correspondence concerning this matter to the	: following:	i \
	Furt Beasley		
	7	lame of Person	
	Waterford Law Group		
<b>\</b>	F	irm/Company	
	P <b>O</b> Box 1089		
<b>∭</b> . '		Address	
	Franklin, Tennessee 37065		
<b>[]</b> {	City/S	State and Zip Code	
₩ 1	kbeasley@waterfordlaw.com		
	E-mail address: (to be use	d for future annual report notif	ication)
For further i	nformation concerning this matter, please call:		
Ku	rt V. Beas ey	615 373-2500 at ()	
<b>\</b>	Name of Contact Person	Area Code Daytii	me Telephone Number
<u>N1.4</u>	ILING ADDRESS: ision of Corporations		ADDRESS: O
Res	iston of Corporations pstration Section	Division of Registration	Corporations 5
ĖΩ	Box 6321	Clifton Bui	lding :
	lahassee, FL 32314		utive Center Circle c, FL 32301
	check for the following amount:		_
미	S125.00 Filing Fee S130.00 Filing Fee & Certificate of Status		S160.00 Filing Fee, Certificate of Status & Certified Copy

• I 1 I	COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS I FLORIDA
IN COMPLIANCE VITH SECTION 605.0902, FLORIDA STATUTES, TI COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	IE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN, LIMITED LIABILITY
Rive Daughters Bakery 30A, LLC	
(Name of Foreign Limited Liability Company: must include "L	imited Liability Company," "L.L.C.," or "LLC.")
	in Florida. The alternate name must include "Limited Liability Company," "L.U.C." or "ELC.")
2. Tennessee  Christiction under the law of which foreign limited liability company is organized)	3. 82-1087083 (FEI number, if applicable)
4.	
(Date first transacted business in Florida, if pr (See sections 605,0904 & 605,0905, F.S. to d	nor to registration.) letermine penalty liability)
5 115 5th Avenue South	6. PO Box 1089
(Street Address of Principal Office)	(Mailing Address)
Franklin, Tennessee 37064	Franklin, Tennessee 37065
7. Name and street address of Florida registered agent: (P.O. Name: Jonathan Walsh Office Address: 605 N. Co. Highway 393	Box NOT acceptable)
Santa Rosa Beach	Florida 32459
Registered agent's acceptance:	(Zip code)
designated in this application, I hereby accept the appointme to comply with the provisions of all statutes relative to the pro- and accept the obligations of my position as registered agent.	e of process for the above stated limited liability company at the place ent as registered agent and agree to act in this capacity. I further agree oper and complete performance of my duties, and I am familiar with gent's signature)
8. The name, title or capacity and address of the person(s) wh	
Title or Capacity: Name and Address:	Title or Capacity: Name and Address:
President Isaac Meek	
128 Clarendon Circle Franklin, TN 37069	
<u></u>	
(Use attachments if necessary)	
9. Attached is a certificate of existence, no more than 90 days of jurisdiction under the law of which it is organized. (If the certificate translator must be submitted)	old, duly authenticated by the official having custody of records in the ficate is in a foreign language, a translation of the certificate under oath
10. This document is executed in accordance with section 605, submitted in a document to the Department of State constitutes	0203 (1) (b), Florida Statutes. I am aware that any false information a third degree felony as provided for in s.817.155, F.S.
Sign	nature of an authorized person
Kurt V. Beasley, Attorney & Agen	t '
11 \	ped or printed name of signee



## Division of Business Services Department of State

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

Issuance Date: 10/24/2017

KURT BEASLEY

PO BOX 1089

FRANKLIN, TN 37065

October 24, 2017

Request Type: Certificate of Existence/Authorization

0254841

Copies Requested:

Document Receipt

Receipt #: 00B629698

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3713807070

\$20.00

Regarding:

Request #:

FIVE DAUGHTERS BAKERY 30A, LLC

Filing Type:

Status:

Limited Liability Company - Domestic

Control #:

897716

Formation/Qualification Date: 04/06/2017

Date Formed:

Active

04/06/2017

Formation Locale: TENNESSEE

Duration Term:

Perpetual

Inactive Date:

Business County: WILLIAMSON COUNTY

## **CERTIFICATE OF EXISTENCE**

I, The Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

## **FIVE DAUGHTERS BAKERY 30A, LLC**

- \* is a Limited Liability Company duly formed under the law of this State with a date of incomporation and duration as given above;
- \* has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filled.

Secretary of State

Processed By: Celt Web User

Verification #: 024746929

Phone (615) 741-6488 \* Fax (615) 741-7310 \* Website: http://tnbear.tn.gov/