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To: Division of Corporations  
Fax Number : (850)617-6383

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Email Address:

Foreign Limited Liability Company  
ANTIOCH-MOSAIC INVESTORS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

2017 NOV 29 PM 12:35

FALL ARMS SEC LLC

D SCOTT  
NOV 30 2017

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. ANTIOCH-MOSAIC INVESTORS, LLC (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," "LLC," or "LLC.")

2. TENNESSEE (Jurisdiction under the law of which foreign limited liability company is organized) 3. 32-2981119 (FEI number, if applicable)

4. 2017 (Date first transacted business in Florida, if prior to registration. (See sections 605.0904 & 605.0905, F.S. to determine penalty liability))

5. 2300 CURLEW ROAD, SUITE 100 (Street Address of Principal Office) PALM HARBOR, FL 34683 6. 2300 CURLEW ROAD, SUITE 100 (Mailing Address) PALM HARBOR, FL 34683

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: CHESTNUT BUSINESS SERVICES, LLC Office Address: 911 CHESTNUT STREET CLEARWATER, Florida 33756 (City) (Zip code)

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. (Registered agent's signature)

Table with 4 columns: Title or Capacity, Name and Address, Title or Capacity, Name and Address. Row 1: MANAGER, BGV MCG ANTIOCH, LLC, 2300 Curlew Road, Suite 100, Palm Harbor, FL 34683.

(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 s.817.155, F.S.

Signature of an authorized person Steven A. Williamson, Authorized Representative

Typed or printed name of signer



**Tre Hargett**  
Secretary of State

**Division of Business Services**  
**Department of State**  
State of Tennessee  
312 Rosa L. Parks AVE, 6th FL  
Nashville, TN 37243-1102

November 21, 2017

LINDA BURR  
911 CHEATNUT ST  
CLEARWATER, FL 33756

Request Type: Certificate of Existence/Authorization  
Request #: 0258022

Issuance Date: 11/21/2017  
Copies Requested: 1

**Document Receipt**

Receipt #: 003668561

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3715728510

\$20.00

Regarding: **Antioch- Mosaic Investors, LLC**  
Filing Type: Limited Liability Company - Domestic  
Formation/Qualification Date: 03/15/2017  
Status: Active  
Duration Term: Perpetual  
Business County:

Control #: 893961  
Date Formed: 03/15/2017  
Formation Locale: TENNESSEE  
Inactive Date:

**CERTIFICATE OF EXISTENCE**

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

**Antioch- Mosaic Investors, LLC**

- \* is a Limited Liability Company duly formed under the law of this State with a date of incorporation 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 filed.

Tre Hargett  
Secretary of State

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