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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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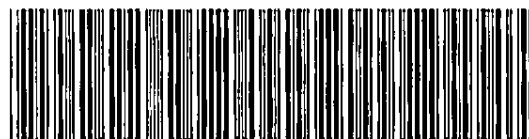
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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K. SALY  
JAN - 8 2018

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** DeMARCUS McHOLDINGS, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

JEAN-LUC FRANCHELL

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

7962 MONTEREY BAY DRIVE

\_\_\_\_\_  
Address

JACKSONVILLE, FLORIDA 32256

\_\_\_\_\_  
City/State and Zip Code

GoodToBeFreeLLC@gmail.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JEAN-LUC FRANCHELL

505

934-5297

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime 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

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$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. DeMARCUS McHOLDINGS, 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," "L.L.C.," or "LLC.")

2. PENNSYLVANIA 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. NOT APPLICABLE  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. <u>c/o ARBOR MANAGEMENT COMPANY</u> (Street Address of Principal Office) <u>1670 GOLDEN MILE HIGHWAY</u> <u>MONROEVILLE, PA 15146</u>	6. <u>c/o ARBOR MANAGEMENT COMPANY</u> (Mailing Address) <u>1670 GOLDEN MILE HIGHWAY</u> <u>MONROEVILLE, PA 15146</u>
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7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Jean-Luc Franchell  
Office Address: 7962 Monterey Bay Drive  
Jacksonville, Florida 32256  
(City) (Zip code)

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SECRETARY OF CORPORATION  
DIVISION  
18 JAN -5 PM 3:04

**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.

(X) Jean-Luc Franchell  
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Managing Member</u>	<u>Jean-Luc Franchell</u> <u>7962 Monterey Bay Drive</u> <u>Jacksonville, Florida 32256</u>	_____	_____
<u>Managing Member</u>	<u>Elizabeth McElhinny</u> <u>279 Cedar Point Road</u> <u>Easton, Maryland 21601</u>	_____	_____

(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.

(X) Jean-Luc Franchell  
Signature of an authorized person

JEAN-LUC FRANCHELL

Typed or printed name of signee

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE  
12/11/2017

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DIVISION OF CORPORATIONS  
18 JAN -5 PM 3:04

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

DEMARCUS McHOLDINGS LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

*Robert L. James*

Acting Secretary of the Commonwealth

Certification Number: TSC171211120893-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify>