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SALLAHASSEE, FLORIDA

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COVER LETTER

TO:

Registration Section

Division of Corporations					
Forge Capital, LLC SUBJECT:					
	Name of L	imited Liability	Company	·	
The enclosed "Application by Foreign I. Existence, and check are submitted to re-	limited Liability Comp	any for Authoriz nced foreign lim	ation to Tr ited liabili	ransact Business in Florida," Certific ty company to transact business in F	cate of lorida,
Please return all correspondence concer-	ning this matter to the f	following:			
Deb McCracken					
	Na	me of Person			
Forge Capital, LLC					
	Fir	m/Company			
7347 Charlotte Pike					
		Address	 ·		
Nashville, TN 37209					
	City/Sta	ite and Zip Code			
dmccracken@forgecapi	itallle.com				
E-ma	il address: (to be used	for future annual	report not	iffication)	
For further information concerning this n	natter, please call:				
Deb McCracken		615 at (620-60	91	
Name of Conta	act Person	Area Code	Day	time Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of Registrati Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
	30.00 Filing Fee &	S155.00 Filin Certified Copy	g 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:

(Name of Foreign	Limited Liability Company; must include "Limited	d Liphility Company ""I I C " or "I	17. 0
(anc or rareign	company, must mende company	u matinity Company, 1211C., or L	LC)
	ame adopted for the purpose of transacting business in Flor	rida. The alternate name must include "Limit	ed Liability Company," "L.L.C," or "LLC.")
Tennessee		3. 82-1166848	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(FE	I number, if applicable)
1. 10/25/2017			
	(Date first transacted business in Florida, if prior to i (See sections 605,0904 & 605,0905, F.S. to determine	registration) me penalty liability)	
5. Forge Capital, LLC		6. Forge Capital, LLC	
(Street Address of I	Principal Office)	(Mailin 7347 Charlotte Pike	g Address)
Nashville, TN 37209			
143/14/110, 114 37209		Nashville, TN 37209	
7 Name and arrest add-	on of Florida maistered and the CO Day	NOT	·
7. Name and <u>street addres</u>	ss of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	URS Agents, LLC	· 	
Office Address:	3458 Lakeshore Drive		
	Tallahassee	77717	
	(City)	, Florida 32312	up code)
lesignated in this applica	gistered agent and to accept service of p tion, I hereby accept the appointment as	s registered agent and agree to	act in this capacity. I further agree
designated in this applica to comply with the provisi	tion, I hereby accept the appointment us ions of all statutes relative to the proper s of my position as registered agent.	s registered agent and agree to and complete performance of	nited liability company at the place. act in this capacity. I further agree my duties, and I am familiar with
designated in this applica to comply with the provisi	tion, I hereby accept the appointment us ions of all statutes relative to the proper s of my position as registered agent.	s registered agent and agree to and complete performance of anetha Bishop, Asst.	nited liability company at the place. act in this capacity. I further agree my duties, and I am familiar with
designated in this applica to comply with the provisi and accept the obligation:	tion, I hereby accept the appointment as ions of all statutes relative to the proper s of my position as registered agent. Registered agent's s	s registered agent and agree to and complete performance of anetha Bishop, Asst.	nited liability company at the place. act in this capacity. I further agree my duties, and I am familiar with Secretary
designated in this applica to comply with the provisi and accept the obligation:	tion, I hereby accept the appointment as ions of all statutes relative to the proper is of my position as registered agent.	s registered agent and agree to and complete performance of anetha Bishop, Asst.	nited liability company at the place. act in this capacity. I further agree my duties, and I am familiar with Secretary
designated in this applica to comply with the provisi and accept the obligation: 3. The name, title or capa	tion, I hereby accept the appointment as ions of all statutes relative to the proper is of my position as registered agent. Registered agent's sacity and address of the person(s) who ha	s registered agent and agree to and complete performance of anetha Bishop, Asst. signalure) is/have authority to manage is/a	nited liability company at the place of act in this capacity. I further agree my duties, and I am familiar with Secretary Secretary
designated in this applica to comply with the provisi and accept the obligation. 8. The name, title or capa Title or Capacity:	ion, I hereby accept the appointment as ions of all statutes relative to the proper is of my position as registered agent. Karamand address of the person(s) who hare and Address: Charles H. Geny 7347 Charlotte Pike	s registered agent and agree to and complete performance of anetha Bishop, Asst. signature) as/have authority to manage is/a Title or Capacity:	secretary Name and Address: William R. Hostettler 421 East Iris Drive, Suite 300
designated in this applica to comply with the provisi and accept the obligation. 8. The name, title or capa Title or Capacity:	tion, I hereby accept the appointment as ions of all statutes relative to the proper is of my position as registered agent. Karame and Address: Charles H. Geny	s registered agent and agree to and complete performance of anetha Bishop, Asst. signature) as/have authority to manage is/a Title or Capacity:	nited liability company at the place. act in this capacity. I further agree my duties, and I am familiar with Secretary Name and Address: William R. Hostettler
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designated in this applicate comply with the provisional accept the obligation. 3. The name, title or capa Title or Capacity: President	ion, I hereby accept the appointment as ions of all statutes relative to the proper is of my position as registered agent. Ke (Registered agent's a secity and address of the person(s) who ha Name and Address: Charles H. Geny 7347 Charlotte Pike Nashville, TN 37209 Carl A. Neuhoff, Jr. 421 East Iris Drive, Suite 300	s registered agent and agree to and complete performance of anetha Bishop, Asst. signature) as/have authority to manage is/a <u>Title or Capacity:</u> Member Member	nited liability company at the place. act in this capacity: I further agree my duties, and I am familiar with Secretary Name and Address: William R. Hostettler 42 East Iris Drive, Suite 300 Nashville, TN 37204 Dainel Richard Beaird P. O. Box 128411
designated in this applicate comply with the provisional accept the obligation. 8. The name, title or capa Title or Capacity: President Member	ion, I hereby accept the appointment as ions of all statutes relative to the proper is of my position as registered agent. Keine and address of the person(s) who ha Name and Address: Charles H. Geny 7347 Charlotte Pike Nashville, IN 37209 Carl A. Neuhoff, Jr. 421 East Iris Drive, Suite 300 Nashville, IN 37204	s registered agent and agree to and complete performance of anetha Bishop, Asst. signature) as/have authority to manage is/a <u>Title or Capacity:</u> Member Member	nited liability company at the place. act in this capacity. I further agree my duties, and I am familiar with Secretary Name and Address: William R. Hostettler 42 East Iris Drive, Suite 300 Nashville, TN 37204 Dainel Richard Beaird
designated in this applica o comply with the provisional accept the obligation. 8. The name, title or capa Title or Capacity: President Member	ion, I hereby accept the appointment as ions of all statutes relative to the proper is of my position as registered agent. Keine and address of the person(s) who ha Name and Address: Charles H. Geny 7347 Charlotte Pike Nashville, IN 37209 Carl A. Neuhoff, Jr. 421 East Iris Drive, Suite 300 Nashville, IN 37204	s registered agent and agree to and complete performance of anetha Bishop, Asst. signature) as/have authority to manage is/a <u>Title or Capacity:</u> Member Member	nited liability company at the place. act in this capacity: I further agree my duties, and I am familiar with Secretary Name and Address: William R. Hostettler 42 East Iris Drive, Suite 300 Nashville, TN 37204 Dainel Richard Beaird P. O. Box 128411
designated in this applicate comply with the provisional accept the obligation. 8. The name, title or capa Title or Capacity: President Member (Use attachments if neces.) Attached is a certificate urisdiction under the law	cition, I hereby accept the appointment assions of all statutes relative to the proper of my position as registered agent. Keinegistered agent	anetha Bishop, Asst. signature) ss/have authority to manage is/a Title or Capacity: Member Member	secretary Name and Address: William R. Hostettler 421 East Iris Drive, Suite 300 Nashville, TN 37204 Dainel Richard Beaird P. O. Box 128411 Nashville, TN 37212 al having custody of records in the
designated in this applicate comply with the provisional accept the obligation. 8. The name, title or capa Title or Capacity: President Member (Use attachments if neces.) Attached is a certificate urisdiction under the law of the translator must be successed. This document is executed.	cition, I hereby accept the appointment assions of all statutes relative to the proper of my position as registered agent. Keinegistered agent	ane the Bishop, Asst. signature) software authority to manage is/a Title or Capacity: Member Member duly authenticated by the officients in a foreign language, a transport of the control of the c	nited liability company at the place. act in this capacity. I further agree my duties, and I am familiar with Secretary Name and Address: William R. Hostettler 421 East Iris Drive, Suite 300 Nashville, TN 37204 Dainel Richard Beaird P. O. Box 128411 Nashville, TN 37212 al having custody of records in the aslation of the certificate under oath

Typed or printed name of signee

Charles H. Geny



Division of Business Services Department of State

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

DOYLE & HORLACHER, PLC TODD D. STEWART, CPA

2424 21ST AVENUE SOUTH, SUITE 202

NASHVILLE, TN 37212

Request Type: Certificate of Existence/Authorization

Request #:

0262459

Issuance Date: 01/05/2018

Filing Fee:

Copies Requested:

\$20.00

\$20.00

January 5, 2018

Document Receipt

Receipt #: 003728067

Payment-Credit Card - State Payment Center - CC #: 3718506588 Forge Capital, LLC

Regarding: Filing Type:

Duration Term:

Limited Liability Company - Domestic

Formation/Qualification Date: 03/23/2017

Status:

Active Perpetual

Business County: DAVIDSON COUNTY

Control # :

895397

Date Formed:

03/23/2017

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

Forge Capital, 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, interest, taxes and penalties owed to this State (as reflected is 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.

Secretary of State

Processed By: Cert Web User

Verification #: 025849433