AMECOCOUSSIG

(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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01/19/18--01002--002 **916.35

SECRETARY OF STATE

7018 JAN 1.6 P 4: 01



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 19, 2017

JUSTIN BARBOUR PO BOX 1221 FRANKLIN, TN 37064

SUBJECT: MICHAEL HYATT & COMPANY, LLC

Ref. Number: W17000099826

FILED US OF STATES OF ASSEE, FLORIDA

We have received your document for MICHAEL HYATT & COMPANY, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$916.25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijeaux Regulatory Specialist

Letter Number: 417A00025600

JAN 1 6 2018

COVER LETTER

TÓ:

TÓ:	Registration Secti Division of Corpo				
SUBJI	е́ст: <u>Міо</u>	hael Hyaft + (OMPANY, LLC of Limited Liability Company		
The en Exister	closed "Application l ace, and check are sul	by Foreign Limited Liability Cor bmitted to register the above refe	mpany for Authorization to Tracerenced foreign limited liabilit	ansact Business in Florida," (y company to transact busine	Certificate of ss in Florida.
Please	return all correspond	dence concerning this matter to th	ne following:		
		Justin Barbo	Name of Person		
					<u> </u>
		PO BOX 122	Firm/Company Address 37064 /State and Zin Code	ASSEC, FL	LED
	<u> </u>	Franklin, TA	/ 37064 /State and Zip Code	0210 P	
		accounting @ mic E-mail address: (to be us			
For fur	ther information con-	cerning this matter, please call:			
	_ Justin	Barbour	at (<u>015</u>) <u>90</u> Area Code Day	15-8143 vtime Telephone Number	
	MAILING ADDE Division of Corpor Registration Section P.O. Box 6327 Tallahassee, FL 32	RESS: rations on	STREET Division Registral Clifton E 2661 Exc	T ADDRESS: of Corporations tion Section	
Enclos	ed is a check for the ☐ \$125.00 Filing		☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Cer of Status & Certified Copy	

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

IN COMPLIANCE WITH SECTION COMPANY TO TRANSACT BUSINE	I 605.0902. FLORIDA STATUTES, THE PC ESS INTHE STATE OF FLORIDA:	OLLOWING IS SURMITTED TO REGIST	ER A FOREIGN LIMITED LIABILITY
	att & Company Led Liability Company; must include "Limite	L C d Liability Company," "L.L C.," or "LI.C.")	
O			
	dopted for the purpose of transacting business in Flo	rida. The alternate reme must include "Limited Lisi	bility Company," "L.L.C," or "LLC")
2. P.AL SEL (Jurisdiction under the law of which fi	oreign lamited hability company is organized)	3. <u>45-5327778</u> (FEI outsil	ner, if applicable)
	Charle of hire for emp (Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, FS to determ	loyee living in Florid	<u>a</u>
5. 219 3rd Ave S	(See sections 605 0904 & 605 0905, FS to determ	ine penahy liability) 6. PO BOX 1221	
(Street Address of Princip Franklin, TN		6. PO BOX 1221 (Mailing Add Franklin, TN	37065
			2018 SEC
7. Name and street address of	Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	Danielle Rodgers	<u> </u>	AND JAN
Office Address:	3852 Mandalay	Dr	SSEE M
	Florida registered agent: (P.O. Box Danielle Rodgers 3852 Mandalay Saint Petersburg (Cry) ce:	, Florida <u>3370</u>	of Si
Registered agent's acceptan	ce: ered agent and to accept service of	process for the above stated limited	i liability.compatto at the place
designated in this application	. I hereby accept the appointment a	is registered agent and agree to act	in this capacity. I further agree
to comply with the provisions and accept the obligations of	of all statutes relative to the proper my position as registered agent.	r and complete performance of my	duties, and I am familiar with
, ,	1 Durhay 1 rd	΄λ -	
_	(Regulared agena's	Signature)	
8. The name, title or capacity <u>Title or Capacity:</u>	and address of the person(s) who h Name and Address:	as/have authority to manage is/are: Title or Capacity:	Name and Address:
President/CO	Michael Hyatt	CFO	Justin Bribar
icc Member	219 31 Ave 5 Franklin TN 37064		- Sciele Boyd Mill the Franklin, TN 37064
(Use attachments if necessary	·)		
9. Attached is a certificate of jurisdiction under the law of v of the translator must be subn	existence, no more than 90 days old, which it is organized. (If the certifica itted)	duly authenticated by the official hate is in a foreign language, a transla	aving custody of records in the tion of the certificate under oath
10. This document is executed submitted in a document to the	in accordance with section 605.020 Department of State ponstitutes a th	03 (1) (b), Florida Statutes, I am awa	re that any false information s.817.155, F.S.
Submittee in a document to the	Onnan - Par		
	Signatur	e of an authorized person	
	Justin Ba	ber	



Division of Business Services Department of State

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

JUSTIN BARBOUR

219 3RD AVE S FRANKLIN, TN 37064

Request Type: Certificate of Existence/Authorization

Request #:

0258372

Issuance Date: 📆 1/28/25 17

Copies Requested:

Document Receipt

Receipt #: 003673421

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3716013326

Regarding:

Michael Hyatt & Company, LLC

Filing Type:

Status:

Limited Liability Company - Domestic

Formation/Qualification Date: 05/31/2012

Active

Duration Term:

Perpetual

Business County: WILLIAMSON COUNTY

\$20.00

687610

Date Formed:

05/31/2012

ovenheer 28

Formation Locale: TENNESSEE

Inactive Date:

Control #:

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

Michael Hyatt & Company, 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 filed the most recent annual report required with this office;
- * 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 #: 025257932