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FAX No.

P. 001

Donna Fuller
McMichael & Gray PC
Phone: 678-373-0556
Fax: 678-373-0522
Email: donna@mcmichaelandgray.com

fax

RECEIVED
JAN 24 2018

TO:	JUDY	FROM:	Donna Fuller
FAX:	850-245-6030	PAGES:	2 (including cover)
PHONE:	850-245-6000	DATE:	January 23, 2018
RE:	Championship Title Agency LLC	CC:	
DOCUMENT NUMBER: W18000006324 / W18000006981			

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

Comments: Please find a copy of the State of Georgia Certificate of Existence for Championship Title Agency LLC that was initially attached to the Application by Foreign Limited Liability Company.

Thank you,

Donna Fuller



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 23, 2018

DONNA FULLER
2055 N BROWN RD, SUITE 250
LAWRENCEVILLE, GA 30043 US

SUBJECT: CHAMPIONSHIP TITLE AGENCY LLC
Ref. Number: W18000006981

We have received your document for CHAMPIONSHIP TITLE AGENCY LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of 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.

Judy A Leggett
Regulatory Specialist II
Registration Section

Letter Number: 918A00001475

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Championship Title Agency 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:

Donna Fuller

Name of Person

Championship Title Agency LLC

Firm/Company

2055 North Brown Road, Suite 250

Address

Lawrenceville, GA 30043

City/State and Zip Code

donna@mcMichaelandgray.com

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

For further information concerning this matter, please call:

Donna Fuller

678

373-0556

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. Championship Title Agency 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. State of Georgia Secretary of State

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 30-1017243

(FEI number, if applicable)

4. N/A

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

5. 2055 North Brown Road Suite 250

(Street Address of Principal Office)

Lawrenceville, GA 30043

6. 2055 North Brown Road Suite 250

(Mailing Address)

Lawrenceville, GA 30043

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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)

Brian Smith, Asst. Secretary

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

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
General Manager	Randall C. McMichael 2055 N. Brown Rd. #250 Lawrenceville, GA 30043		

(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

Randall C. McMichael, General Manager

Typed or printed name of signer

Control Number : 17125546

STATE OF GEORGIA**Secretary of State**

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, **Brian P. Kemp**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

Championship Title Agency LLC
a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 15178766
Date Inc/Auth/Filed: 11/30/2017
Jurisdiction : Georgia
Print Date : 01/24/2018
Form Number : 211



B. P. Kemp

Brian P. Kemp
Secretary of State