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(Re	questor's Name)	
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S. WARREN JAN 2 5 2018

COVER LETTER

TO:	Registration Se Division of Cor		;			
SUBJI	REM Cha	at Corne	ers, LLC			<u>_</u> _
			Name of I	imited Liability C	ompany	·
The en	iclosed "Applicationce, and check are	n by Fore submitted	ign Limited Liability Comp to register the above refere	any for Authorizat need foreign limit	ion to Tra ed liability	nsact Business in Florida." Certificate of company to transact business in Florida
Please	return all correspo	ndence co	oncerning this matter to the	following:		
	Daisy (Castro				
			No.	nme of Person	-	
	Schulte	en Ward I	urner & Weiss, LLP			
			Fi	rm/Company		
	260 Pe	achtree St	reet, Suite 2700			
		-		Address	•	
	Atlanta	a, Georgia	30303			
			City/S	tate and Zip Code		
	d.castro(@swtwlav	v.com			
			E-mail address: (to be used	for future annual	report not	ification)
For fu	rther information c	oncerning	this matter, please call:			
	Daisy Castro			404 at (688-680	
		Name of	Contact Person	Area Code	Day	time Telephone Number
	MAILING AD Division of Cor Registration Sec P.O. Box 6327 Tallahassee, FL	porations ction			Division Registrate Clifton B 2661 Exe	of Corporations ion Section suilding ecutive Center Circle see, FL 32301
Enclo.	sed is a check for t □ \$125.00 Filii		ng amount: \$\Bigsize \text{S130.00 Filing Fee & Certificate of Status}\$	☐ \$155.00 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 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Date first transacted business in Florida, if prior to registration) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 2607 Little Road (Street Address of Principal Office) Valrico, F.L. 33596	number, if applicable)
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability.) 2607 Little Road (Street Address of Principal Office.) (Mailing	
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 2607 Little Road (Street Address of Principal Office) (Mailing	
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 2607 Little Road (Street Address of Principal Office) 6. (Mailing	
(Street Address of Principal Office) (Mailing	
Valueo, FL, 33596	; Address)
· · · · · · · · · · · · · · · · · · ·	
Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	<u> </u>
Name: Corporation Service Company	
Office Address: 1201 Hays Street	·
Office Address.	ाः ==:
Tallahassee , Florida 32301	ip code)
egistered agent's acceptance: (Cuy)	5 5 5
signated in this application, I hereby accept the appointment as registered agent and agree to	ited liability company at the pla
isignated in this application, I hereby accept the appointment as registered agent and agree to be complywith the provisions of all statutes relative to the proper and complete performance of n	ited liability company at the pla
esignated in this application, I hereby accept the appointment as registered agent and agree to a complywith the provisions of all statutes relative to the proper and complete performance of necept the obligations of my position as registered agent.	ited liability company at the pla act in this capacity. I further a ny duties, and I am familiar wi
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The name, title or capacity and address of the person(s) who has/have authority to manage is/20 Title or Capacity: Member Manager Raymond Mills Responsible to the appointment as registered agent and agree to the proper and complete performance of manage is/20 (Registered agent's signature) The name, title or capacity and address of the person(s) who has/have authority to manage is/20 Title or Capacity: Member Manager Raymond Mills Member Member	ited liability company at the place in this capacity. I further any duties, and I am familiar with retary Same and Address: Barbara Jill Mills 2007 Linle Road
The name, title or capacity and address of the person(s) who has/have authority to manage is/ar Title or Capacity: Name and Address: Registered agent are registered agent. Name and Address: Member Manager Raymond Mills Member	ited liability company at the place in this capacity. I further any duties, and I am familiar with retary Same and Address: Barbara Jill Mills
The name, title or capacity and address of the person(s) who has/have authority to manage is/20 Title or Capacity: Member Manager Raymond Mills Raymond Mills Raymond Mills Raymond Mills Member Member Manager Raymond Mills Member Member Manager Raymond Mills Member Member Manager Raymond Mills Member	ited liability company at the place in this capacity. I further any duties, and I am familiar with retary Same and Address: Barbara Jill Mills 2007 Linle Road
(Registered agent's signature) The name, title or capacity and address of the person(s) who has/have authority to manage is/at Title or Capacity: Member Manager Raymond Mills Member 2607 Little Road Valrico, FL, 33596	ited liability company at the place in this capacity. I further any duties, and I am familiar with retary Same and Address: Barbara Jill Mills 2007 Linle Road
Title or Capacity: Member Manager Raymond Mills Raymond Mills Raymond Mills Raymond Mills Member Michael D. Hogan Member Michael D. Hogan	ited liability company at the place in this capacity. I further any duties, and I am familiar with retary Same and Address: Barbara Jill Mills 2007 Linle Road

Typed or printed name of signee

Control Number: 18004893

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

REM Chat Corners, 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 : 15166924 Date Inc/Auth/Filed: 01/11/2018 Jurisdiction : Georgia Print Date : 01/23/2018

Form Number : 211



B: P. Brian P. Kemp Secretary of State