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(F	Requestor's Name)
(A)	address)
	ddress)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(C	Occument Number)
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JAN 3 1 2019

Y SULKER

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•	· co	VER LETTER	•	-	
TO: Registration Section Division of Corporation	ns .				
Revolution Industri					
	Name of	Limited Liability	Company		_
The enclosed "Application by Fo Existence, and check are submitte					
Please return all correspondence	concerning this matter to the	following:			
Ron Meadows					
	N	ame of Person			_
Revolution Ind	ustrial Group, LLC				
	F	irm/Company			_
10133 Sherrill	Blvd., Suite 200				
		Address	<u></u> .		_
Knoxville, Tn.	37932				
	City/S	tate and Zip Code			_
ronm@rigitup.us	·				
	E-mail address: (to be use	d for future annua	l report notific	ration)	_
For further information concerning	g this matter, please call:				
Ron Meadows		865	333-0674		
Name o	of Contact Person	_ at (Area Code	Daytim	e Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Registration Clifton Build	Corporations Section ding ive Center Circle	
Enclosed is a check for the follow \$125.00 Filing Fee	ring amount: \$\Bigsiz\$ \$\\$130.00\$ Filing Fee & Certificate of Status	☐ \$155.00 Fili Certified Copy		3 \$160,00 Filing Fee, Of Status & Certified Co	

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

Revolution Industrial C	Limited Liability Company, must include "Li	imited Liabelity	Compa	nv." "L.L.C" or "L.C."		
(1-11-11-11-11-11-11-11-11-11-11-11-11-1			,	-,· '',		
me unevailable, enter alternate o	senc adopted for the purpose of transacting business	in Florida. The al			hildy Company,""L.L.C,"	<u>≠111</u> 2.7
ennessee		_ 3.	81-49	56712		
(Jurisdiction under the law of w	hich foreign lemited liability company is organized)	_		(FEI sand	icr, if applicable)	
	(Date first transacted business in Florida, if pri (See sections 605.0904 & 605.0905, F.S. to de	etermine penelly	inbulty)			
916 Katherine Ave.		6.	10133	Sherrill Blvd., Suite		
(Street Address of i Knoxville, Tn. 37921	Tiscopal Critica)		Knoxy	ille, Tn. 37932	(11)	
Name and street address	ss of Florida registered agent: (P.O. I	Box <u>NOT</u> a	ccepta	ple)		
Name:	Corporation Service Company					
Office Address:	1201 Hays Street					
	Tallahassee			Florida 32301		
	(Cay)			(Zip ood	 -	
ring been named as re gnated in this applica omply with the provisi	stance: gistered agent and to accept service stion, I hereby accept the appointment ions of all statutes relative to the pro s of my position as registered agent.	nt as registe oper and co	red ag	ent and agree to act	liability company in this capacity. L	fürther d miliar w
ving been named as re ignated in this applica omply with the provisi	gistered agent and to accept service tion, I hereby accept the appointment ions of all statutes relative to the pro s of my position as registered agent.	nt as registe oper and con	red ag	ent and agree to act	liability company in this capacity. L	Jurther o
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Tre Hargett Secretary of State

Division of Business Services **Department of State**

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

RON MEADOWS

RONM@RIGITUP.US RONM@RIGITUP.US RONM@RIGITUP.US

KNOXVILLE, TN 37932

Request Type: Certificate of Existence/Authorization

Request #:

0263918

Issuance Date: 01/22/2018

Copies Requested:

Document Receipt

Receipt #: 003752355

Payment-Credit Card - State Payment Center - CC #: 3719602310

Filing Fee:

\$20.00

January 22, 2018

\$20.00

Regarding:

REVOLUTION INDUSTRIAL GROUP, LLC

Filing Type:

Duration Term:

Limited Liability Company - Domestic

Formation/Qualification Date: 01/11/2017

Status:

Active Perpetual

Business County: KNOX COUNTY

Control#:

Date Formed:

01/11/2017 👄

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

REVOLUTION INDUSTRIAL GROUP, 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 in 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

Verification #: 026048425

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Phone (615) 741-6488 * Fax (615) 741-7310 * Website: http://tnbear.tn.gov/