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SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 2/7/2018		<i>⇔WALK</i>	<i>IN*</i> *
ENTITY NAME T BROV	VN ADVISORY LLC		
DOCUMENT NUMBER_			
	PLEASE FILE THE ATTACHED AND RETURN		
xxxxxx	Plain Copy		
	Certified Copy Certificate of Status		
***	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**		
	Certified Copy of Arts & Amendments		
	Certificate of Good Standing		
	APOSTILLE' / NOTARIAL CERTIFICATION		
COUNTRY OF DESTINAT NUMBER OF CERTIFICAT			
TOTAL OWED 125.00	снеск # ⁴⁵¹⁶		
Please call Tina at th	be above number for any issues or concerns. Thank you s	o much!	

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. T BROWN ADVISOR		
(Name of Foreign	Limited Liability Company, must include "Limite	rd Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, creer alternate n	ame adopted for the purpose of transacting business in Flo	orida. The alternate name must include "Limited Liabilly Company," "L.L.C." or "LLC.")
2. Delaware		3.
(Jerisdiction under the law of w	high foreign limited liability company is organized)	(FEI number, il spplicable)
4.		
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration) rine pensity liability)
5. 1115 Orange Arbour T		6. 1115 Orange Arbour Trail @ 423
(Surea Address of Ococe, FL 34761	hiveipal Office)	(Mailing Address) Ococo, FL 34761
Occee, 1 L 34761		Ococe, FL 34701
7. Name and street addres	ss of Florida registered agent: (P.O. Box	x NOT acceptable)
Name:	Universal Registered Agents, Inc.	
Office Address:	3458 Lakeshore Drive	
	Tallahassee	, Florida 32312
Registered agent's accep	(City)	(Ztp cods)
Having been named as re designated in this applica to comply with the provis	gistered agent and to accept service of attempts of the service of a service of the service of t	process for the above stated limited liability company at the place as registered agent and agree to act in this capacity. I further agree is and complete performance of my duties, and I am familiar with
	Dates Kuga	Karen Rozar, Asst. VP
	(Rep) ered agent's	
8. The name, title or can	acity and address of the person(s) who h	nas/bave authority to manage is/ace:
Title or Capacity:	Name and Address:	Title or Capacity: Name and Address:
Member	Kenneth Terrell Brown II	
	1115 Orange Arbour Trail #423, Ocoee, FL 34761	
(Use attachments if neces	sary)	
9. Attached is a certificate jurisdiction under the law of the translator must be s	of which it is organized. (If the certifica-	, duly authenticated by the official having custody of records in the ste is in a foreign language, a translation of the certificate under oath
10. This document is execute submitted in a document to	suted in accordance with section 605,020 to the Department of State constitutes a the	03 (1) (b), Florida Statutes. I am aware that any false information bird degree felony as provided for in s.817.155, F.S.
	1. S.A.M.	Mr.
	Signature	ne of an audhorized person
	_ KENNETH TENER	L Browni T
	Typed o	or primed name of signee

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "T BROWN ADVISORY LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE SIXTEENTH DAY OF JANUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "T BROWN ADVISORY LLC" WAS FORMED ON THE ELEVENTH DAY OF JANUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

18 FEB - 7 AM 55 4.9

Authentication: 201971171

Date: 01-16-18

6705780 8300

SR# 20180259907

You may verify this certificate online at corp.delaware.gov/authver.shtml