1499 MB00000 1499

| (Requestor's Name) | | | | | | | |
|-----------------------------------------|--|--|--|--|--|--|--|
| (Address) | | | | | | | |
| (Address) | | | | | | | |
| (City/State/Zip/Phone #) | | | | | | | |
| PICK-UP WAIT MAIL | | | | | | | |
| (Business Entity Name) | | | | | | | |
| (Document Number) | | | | | | | |
| Certified Copies Certificates of Status | | | | | | | |
| Special Instructions to Filing Officer: | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Office Use Only



300309008463

02/12/18--01022--031 **125.00



D. SCOTT FEB 1 3 2013

COVER LETTER

| | gistration Section Ision of Corporatio | ńs | | | | | | |
|----------------------------------------------------------------------------------------------------|-----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-------------|------------------------------------|----------------------------|-----------------------------|-------------------|
| SUBJECT: | Munroe Consultin | g,LLC | | | | | | |
| • | - | Name of | Limited Liability (| Company | | | _ | |
| The enclosed Existence, ar | l "Application by Fo id check are submitte | reign Limited Liability Comp ed to register the above refere | pany for Authoriza enced foreign limit | tion to Tra | ansact Business y company to tr | in Florida, ansact busi | ," Certifica iness in Fl | ate of orida., |
| Please return | all correspondence | concerning this matter to the | following: | | | | | |
| | MARSHA SIF | lA . | | | | | | |
| | | N | ame of Person | | | | | |
| | INCFILE.COM | M LLC | | | | | | |
| | <u> </u> | Fi | rm/Company | | | | _ | |
| | 17350 STAT | E HWY 249 SUITE 22 | 0 | | | | | |
| | | , | Address | | | | _ | |
| | HOUSTON T | X 77064 | | | | | | |
| | City/State and Zip Code | | | | | | - 26 | |
| | marsha@incfile | e.com | | | | | دُ <u>.</u> | 3 3 |
| | | E-mail address: (to be used | for future annual | report not | tification) | | - ' | |
| For further in | formation concerning | g this matter, please call: | | | | | ., | -17 |
| MARSHA SIHA | | | 888 at (| 462-34 | 453 X 701 | | - <u></u> | مسب مدر د |
| | Name (| of Contact Person | Area Code | Day | time Telephone | Number | 27 | |
| 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 | | | | | | |
| | check for the follow 125.00 Filing Fee | ring amount: ☐ \$130.00 Filing Fee & Certificate of Status | ☐ \$155.00 Filin Certified Copy | g Fee & | □ \$160.00 Fi of Status & C | | | |

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 COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

| Munroe Consulting, Li | LC | | |
|---------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|----------------------------|
| • | ign Limited Liability Company; must include | "Limited Liability Company," "L.L.C.," or " | LLC.") |
| Munroe Consulting | Group, LLC | | |
| (If name unavailable, enter all Liability Company," "L.L.C," | ternate name adopted for the purpose of transa or "LLC.") | cting business in Florida. The alternate name | must include "Limited |
| 2. GA | 3. | | |
| (Jurisdiction under the law of company is organized) | of which foreign limited liability | (FEI number, if applicable) | |
| N/A | | | |
| 4. (37.) | (Date first transacted business in Flori | da, if prior to registration.) | |
| 5. 4706 Brazil Wood Ci | (See sections 605.0904 & 605.0905, F.S. | . to determine penalty liability) | |
| Kennesaw, GA, 301 | | | |
| | (Street Address of Principal C | Office) | |
| 6. 4706 Brazil Wood Ct | | | |
| Kennesaw, GA, 301 | | | , ~ > |
| | (Mailing Address) | | 2010 |
| 7. Name and street addres | s of Florida registered agent: (P.O. Box] | NOT acceptable) | } |
| Name: | LEGALING CORPORATESERVIC | ES INC. | · |
| Office Address: | 5237 SUMMERLIN COMMONS SU | UITE 400 | |
| | FORT MYERS | , Florida <u>33907</u> | |
| | (City) | (Zip code) | ٠, |
| Registered agent's accept | tance: | | د |
| Having been named as re- | gistered agent and to accept service of pr tion, I hereby accept the appointment as | rocess for the above stated limited liability | ity company at the place |
| to complywith the provision | ons of all statutes relative to the proper a | nd complete performance of my duties, | and I am familiar with and |
| | ny position as registered agent. | Λ 0 · I . | |
| | with | Climent | |
| | (Registered agen | t's signature) | |
| 8 The name title or cans | acity and address of the person(s) who has | have authority to manage is/are: | |
| • | - 4706 Brazil Wood Ct., Kennesaw, | | |
| | | | |
| | | <u> </u> | |
| | | | |
| | | | |
| Attached is a certificate jurisdiction under the law. | of existence, no more than 90 days old, d of which it is organized. (If the certificate | uly authenticated by the official having one is in a foreign language, a translation of | ustody of records in the |
| of the translator must be si | ubmitted) /s | | |
| | Jum Messa | Λ0 | |
| | Signature of an aut | bL horized person | |
| This dogument is account | | | |
| submitted in a document to | d in accordance with section 605.0203 (1) the Department of State constitutes a thir | rd degree felony as provided for in s.817. | 155, F.S. |
| | Tim Munroe | | |
| | Typed or printed na | me of signee | |

Control Number: 16009248

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

Munroe Consulting, LLC A Domestic Limited Liability/Company

was formed in the junsdiction 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 : 15256753
Date Inc/Auth/Filed: 01/19/2016
Jurisdiction : Georgia
Print Date : 02/02/2018

Form Number : 211



Brian P. Kemp Secretary of State