

M1800003369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

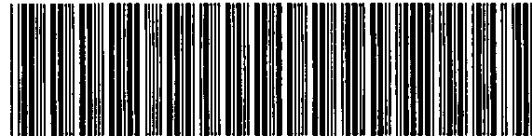
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

0018-11829

Office Use Only



000308406070

02/05/18--01021--023 \*\*160.00

FILED  
18 MAR -9 PM 3:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

O SIMMONS  
APR 09 2018

# FAX

TO: Octavia Simmons	FROM:
FAX # 850 245 6030	FAX #: 706-651-0355
DATE: 4-9-18	# OF PAGES:

Message:

Attention:

Octavia Simmons,



Reference #: W18000011829

RECEIVED

2018 APR -9 PM 2:57

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 6, 2018

JOSEPH MULLINS  
220 BOY SCOUT RD  
AUGUSTA, GA 30909

SUBJECT: T. CHSTIN GRACE JR., LLC  
Ref. Number: W18000011829

*T. Chstia Grace Jr, LLC*

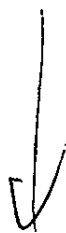
We have received your document for T. CHSTIN GRACE JR., LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons  
Regulatory Specialist II

Letter Number: 318A00002467



*See enclosed Thanks*

RECEIVED

FEB 22 2018

*Jeff Mullins*

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** T. Chastin Grace Jr., 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:

Joseph F. Mullins

\_\_\_\_\_  
Name of Person

The Mullins Companies

\_\_\_\_\_  
Firm/Company

220 Boy Scout Road

\_\_\_\_\_  
Address

Augusta, GA 30909

\_\_\_\_\_  
City/State and Zip Code

joe@mullinsmanagement.net and jeff@mullinsmanagement.net

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

For further information concerning this matter, please call:

Joe Mullins

706  
at ( )

8298638

\_\_\_\_\_  
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. T. Chastin Grace Jr., 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 3. 46-5518387  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

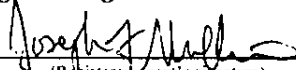
4. 1/31/2018 (pending this approval)  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 220 Boy Scout Road 6. same as principal address  
(Street Address of Principal Office) (Mailing Address)  
Augusta, GA 30909

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  
Name: Joseph F. Mullins  
Office Address: 1601 N. Central Ave., Unit 202  
Flagler Beach, Florida 32136  
(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)

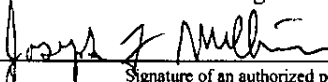
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>President</u>	<u>Joseph F. Mullins</u> <u>1601 N. Central Ave., Unit 202</u> <u>Flagler Beach, FL 32136</u>		

(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

Joseph F. Mullins  
Typed or printed name of signee

Control Number : 14040476

# 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

**T. Chastin Grace, Jr., 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 : 15417609  
Date Inc/Auth/Filed: 04/02/2014  
Jurisdiction : Georgia  
Print Date : 03/02/2018  
Form Number : 211



*B. P. Kemp*

Brian P. Kemp  
Secretary of State