

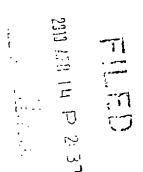
(Requestor's Name)
(Address)
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(,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Southername)
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SIMIRES

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Smart Living, 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:
Lynn Benefield Name of Person
Name of Person
5 mart Living, LLC
2101 W. Clinton Ave Svite 201 Address
Huntsville AL 35805 City/State and Zip Code
Lynn @ Breland companies. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lynn Benefield at (256) 713.3636 E
Lynn Benefield at (256) 713-3636 F Name of Contact Person Area Code Daytime Telephone Number 7 MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 Lynn Benefield at (256) 713-3636 F Area Code Daytime Telephone Number 7 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 \$\Bigcup \$130.00 Filing Fee & Certificate Certificate of Status \$\Bigcup \$Certificate of Status \$\Bigcup \$Certified Copy \$\Bigcup \$\Bin



May 3, 2018

LYNN BENEFIELD 2101 W CLINTON AVE SUITE 201 HUNTSVILLE, AL 35805

SUBJECT: SMART LIVING, LLC Ref. Number: W18000041575

We have received your document for SMART LIVING, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Dionne M Scott Regulatory Specialist II

2313 1.23 1 4 P 2:

Letter Number: 818A00009164



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

-IN COMPLIANCE PITTENSCTION MEDIODE FLORIDE STATUTEN. THE FOLLOWING INSUMMITTED TO RECISTER A FOREXIN-LIMITED HAI - COMPANY TO TRANSACT BUSINESS IN THE SIMIE OF FLORIDA	था गः
Smart Living LLC	
Single of Foreign Americal Liebbirs Company many include "Limited Liebbirs Company" TLLC or "LLC" or "	
If some one-soluble, more alternate enterior for the purpose of Summaring Sustains in Person To abstract nature made such Command Labelet Company 1 T.L.C. or T.L.C.	
Delaware of the of the of the set larger less of healthy company is urganized (15-5577476)	
resolution under the less of which have as less as leading company in department (FE) seasons Topylacartes	
1) See New Hampson and Phanes of Phanes, of print to requirements,	
· 2101 W. Clinton Ave # 201 o ZICI W. Clinton Ave # 201	
Huntwille AL 35805 Huntwille AL 35805	
Transfer At 35 and 5	
? Name and street address of Florida registered agent: (P.O. Box NOI acceptable)	
Name Parific Kocistored Agent, Inc	
Office Address 5647 100 10th Avenue North	
Royal Palm Beach Florida 33411	
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 pla- designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further a	
to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar which	
and accept the obligations of my position as registered agent.	
<u>Via Phone Call to Charle's Math as</u>	
Charles F. Mathias, President, Pacific Registered Agents, Inc> //// 8 The mane, title or capacity and address of the person(s) who has/have authority to manage is/are.	7
Title of Capacity: Name and Address: Title of Capacity: Name and Address:	
Column Co	
2101 D. Chaten Har Zei	_
Manager Chad Valliani Zioi W. Chaten Amazer Thankwile A 35205	- _
Huataille the 35805	- —
10: 10: Chaten Ave 2:1	-
Huatanile to 35805	
(Use attachments if necessary)	
	r In
1Use attachments if necessary) 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of repords 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 oa	r

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SMART LIVING, 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 TWENTY-FIFTH DAY OF APRIL, A.D. 2018.

Authentication: 202573888

Date: 04-25-18