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	strution Section , ion of Corporations	¥.		٠٠.	
	McKnight Landscape Architects LLC				
	Na	me of Limited Liab	ntity Con	npany	
	'Application by Foreign Limited Liability check are submitted to register the above				
Please return a	Il correspondence concerning this matter	to the following:			
	Ryan McKnight				
		Name of Perso	nn -		
	McKnight Landscape Architects LLC	С			
		Firm/Company	·		
	668 South Foster Drive Ste 101				
		Address			
	Baton Rouge, Louisiana 70806				
		City/State and Zip	Code		
	Ryan@mcknight-la.com				
	E-mail address: (to	be used for future a	nnual rep	port notification)	
For further info	ormation concerning this matter, please c	all:			
Ryan	McKnight	225 at ()	924-1265	
	Name of Contact Person	Area	Code	Daytime Telephone Number	
Divis Regis P.O. I	LING ADDRESS: ion of Corporations tration Section Box 6327 hassee, FL 32314		Di Re Cl 26	FREET ADDRESS: vision of Corporations egistration Section ifton Building 61 Executive Center Circle	
			Та	Illahassee, FL 32301	

☐ \$155.00 Filing Fee &

Certified Copy

■ \$160.00 Filing Fee, Certificate of Status & Certified Copy

Enclosed is a check for the following amount: □ \$125.00 Filing Fee

□ \$130.00 Filing Fee & Certificate of Status

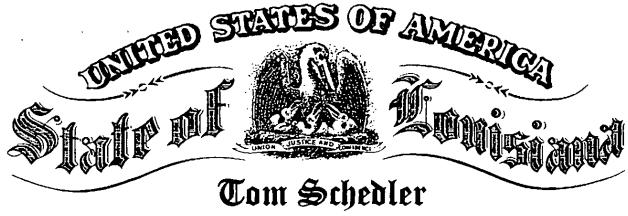
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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:

<u> </u>	nitects FL LLC		
	me adopted for the purpose of transacting business in Flo		,addity Company," "L. L.C," or "LEC")
Louisiana (Jurisdiction under the law of wh	ich foreign limited liability company is organized)	3. 71-0904852 (FEI nu	unber, if applicable)
·	(Date first transacted business in Florida, if prior to		
649 Court Footon Dr	(See sections 605 0904 & 605 0905, F.S. to determ	•	
668 South Foster Dr. (Street Address of Pr	nncipal Office)	6. 668 South Foster Dr. (Mailing A	ddress)
Ste 101		Ste 101	
Baton Rouge, LA 7080	6	Baton Rouge, LA 70806	
			18 MAY 21
. Name and street address	s of Florida registered agent: (P.O. Box	NOT acceptable)	A 5
Name:	Registered Agents Inc		21
Office Address:	3030 N. Rocky Point Drive Ste 150A		
(511) to 1100.005.	Tame	23607	PM C OS
	Tampa	, Florida <u>33607</u> 	ä
aving been named as reg esignated in this applicat comply with the provision	gistered agent and to accept service of pion. I hereby accept the appointment a ons of all statutes relative to the proper	process for the above stated limit is registered agent and agree to ac	ed liability company at the place of in this capacity. I further ag
laving been named as reg esignated in this applicat o comply with the provision	ance: gistered agent and to accept service of gion, I hereby accept the appointment a	process for the above stated limit is registered agent and agree to ac	ed liability company at the place of in this capacity. I further ag
esignated in this applicate comply with the provision	ance: gistered agent and to accept service of gion, I hereby accept the appointment a ons of all statutes relative to the proper	process for the above stated limite is registered agent and agree to a and complete performance of m	ed liability company at the place of in this capacity. I further ag
laving been named as reg esignated in this applicat o comply with the provision and accept the obligations 3. The name, title or capa	ance: gistered agent and to accept service of gion. I hereby accept the appointment a cons of all statutes relative to the proper of my position as registered agent. (Registered agent's city and address of the person(s) who have	process for the above stated limits registered agent and agree to a r and complete performance of my signature)	ed liability company at the place of in this capacity. I further ag y duties, and I am familiar wit
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laving been named as regestinated in this applicate or comply with the provisional accept the obligations. 3. The name, title or capa Title or Capacity: Landscape Architect Use attachments if necess.	ance: gistered agent and to accept service of gion. I hereby accept the appointment a cons of all statutes relative to the proper of my position as registered agent. Registered agent's city and address of the person(s) who have and Address: Wesley Wilkerson 668 South Foster Drive Ste 10 Baton Rouge, LA 70806 sary) of existence, no more than 90 days old, of which it is organized. (If the certificate	process for the above stated limits registered agent and agree to a a rand complete performance of my signature) as/have authority to manage is/are: Title or Capacity:	ed liability company at the placet in this capacity. I further as y duties, and I am familiar with the Name and Address: Name and Address:

Typed or printed name of signee

Ryan McKnight



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

MCKNIGHT LANDSCAPE ARCHITECTS, LLC

A limited liability company domiciled in BATON ROUGE, LOUISIANA,

Filed charter and qualified to do business in this State on June 04, 2002,

I further certify that the records of this Office indicate the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

I further certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

April 25, 2018

Certificate ID: 10944975#L7Q83

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov

Secretary of State
Web 35280170K