MECCULOSSE

| (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: |
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COVER LETTER

TO:

Registration Section

| Di | ivision of Corporation | ns | | | |
|-----------------|--|--|------------------------------------|---|----------------|
| SUBJECT | | , a Georgia Limited Liabilit | y Company | | |
| oordeo. | | Name of I | Limited Liability | Company | |
| | | | | ation to Transact Business in Florida," ited liability company to transact busin | |
| Please retur | m all correspondence of | concerning this matter to the | following: | | |
| | Teresa Chung | ı | | | |
| | | Ne | ime of Person | ······ | |
| | Yong Chung, | LLC | | | |
| | | Fi | пп/Сотрапу | | |
| | 3835 McCoy l | Road | | | ~a |
| | | | Address | | · - |
| | Orlando, FL. 3 | 32812 | | | |
| | | City/St | ate and Zip Code | | |
| | teresachung@a | att.net | | | 1 |
| | | E-mail address: (to be used | for future annual | report notification) | - |
| For further | information concernin | g this matter, please call: | | | Ļ |
| Te | eresa Chung | | 404 at (| 317-3833 | |
| | Name o | f Contact Person | Area Code | Daytime Telephone Number | |
| Di Re P.0 | vision of Corporations egistration Section D. Box 6327 Ilahassee, FL 32314 | | | STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, PL 32301 | |
| | a check for the follow \$125.00 Filing Fee | ing amount: \$\Boxed{1} \$130.00\$ Filing Fee & Certificate of Status | ☐ \$155.00 Filir Certified Copy | | |

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

IN COMPLIANCE WITH SECTION 608.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| orgia | | n Florida. The alternate name must in | | • • • |
|--|--|--|--|---|
| | | 3. <u>58-2551818</u> | | |
| (Jurisdiction under the law of w | bich foreign limited liability company is organized) | | (FEI round | er, if applicable) |
| luly 6,2018 | | | | |
| | (Date first transacted business in Florida, if pri (See sections 605.0904 & 605.0905, F.S. to de | or to registration.) termine penalty liability) | | |
| 3835 McCoy Road | | 6. 3835 McCoy | Road | |
| (Street Address of | Principal Office) | Orlando, FL | (Mailing Addr | u s) |
| Orlando, FL 32812 | | Ollando, i E | 32012 | |
| | <u> </u> | | | **3 |
| Varne and street addre | ss of Florida registered agent: (P.O.) | Box NOT acceptable) | | و . دند. فيرو |
| TAILL BIN SHEEL BUILD | _ | son ito i accebanic) | | |
| Name: | Teresa Chung | | | ; |
| Office Address: | 3835 McCoy Road | | | |
| | | • | | • |
| | Orlando | 71. d. | . 32812 | |
| ving been named as re ignated in this applica comply with the provis | egistered agent and to accept service tion, I hereby accept the appointme ions of all statutes relative to the pro s of my position as registered agent. | of process for the above nt as registered agent and per and complete perfort | d agree to act | liability company at the in this capacity. I furth |
| signated in this applica comply with the provis | (Cky) stance: egistered agent and to accept service stion, I hereby accept the appointment ions of all statutes relative to the pro | of process for the above nt as registered agent and per and complete perfort | stated limited d agree to act | liability company at the in this capacity. I furth |
| ving been named as re signated in this applica comply with the provis I accept the obligation | ctance: registered agent and to accept service registered agent. (Registered agent) | of process for the above nt as registered agent and per and complete perfort envelopments | stated limited d agree to act mance of my d | liability company at the in this capacity. I furth |
| ving been named as re ignated in this applica comply with the provis I accept the obligation The name, title or cap | ctance: egistered agent and to accept service stion, I hereby accept the appointment ions of all statutes relative to the pro s of my position as registered agent. | of process for the above nt as registered agent and per and complete perfort envelopments | stated limited d agree to act mance of my d anage is/arc: | liability company at the in this capacity. I furth |
| ving been named as re signated in this applica comply with the provis I accept the obligation | ctance: egistered agent and to accept service ation, I hereby accept the appointment ions of all statutes relative to the pro s of my position as registered agent. (Registered agent acity and address of the person(s) wh | of process for the above nt as registered agent and per and complete perform envelopments | stated limited d agree to act mance of my d anage is/arc: | liability company at the in this capacity. I furth futies, and I am familia |
| ving been named as re ignated in this applica comply with the provis d accept the obligation The name, title or cap. Title or Capacity: | ctance: egistered agent and to accept service ation, I hereby accept the appointment ions of all statutes relative to the pro s of my position as registered agent. (Registered agent acity and address of the person(s) wh Name and Address: Yong Chung 3835 McCov Road | of process for the above nt as registered agent and per and complete perform envelopments | stated limited d agree to act mance of my d anage is/arc: | liability company at the in this capacity. I furth futies, and I am familia |
| ving been named as re ignated in this applica comply with the provis accept the obligation The name, title or cap. | ctance: egistered agent and to accept service ation, I hereby accept the appointment ions of all statutes relative to the pro s of my position as registered agent. (Registered agent acity and address of the person(s) wh Name and Address: Yong Chung | of process for the above nt as registered agent and per and complete perform envelopments | stated limited d agree to act mance of my d anage is/arc: | liability company at the in this capacity. I furth futies, and I am familia |
| ving been named as re ignated in this applica comply with the provis d accept the obligation The name, title or cap. Title or Capacity: | ctance: egistered agent and to accept service ation, I hereby accept the appointment ions of all statutes relative to the pro s of my position as registered agent. (Registered agent acity and address of the person(s) wh Name and Address: Yong Chung 3835 McCov Road | of process for the above nt as registered agent and per and complete perform envelopments | stated limited d agree to act mance of my d anage is/arc: | liability company at the in this capacity. I furth futies, and I am familia |
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Typed or printed name of signed

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 DOCKET NUMBER : 022960626
CONTROL NUMBER : K908869
DATE INC/AUTH/FILED: 02/23/1999
JURISDICTION : GEORGIA
PRINT DATE : 10/23/2002

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FORM NUMBER : 211

BARRICKMAN, ALLRED & YOUNG LLC CHRISTOPHER SIMON 5871 GLENRIDGE DR STE 330 ATLANTA, GA 30328

CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

YONG CHUNG, LLC A GEORGIA LIMITED LIABILITY COMPANY

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above 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 abovenamed 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.



Cathy Cox Secretary of State