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3 AUG -2 PM 9: 28

18 AUG -2 AN 10: 36

O SIMMONS AUG 0 3 2018 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 325026 8205728

AUTHORIZATION :

COST LIMIT : \$ 125\.00

ORDER DATE : July 30, 2018

ORDER TIME : 9:41 AM

ORDER NO. : 325026-001

CUSTOMER NO: 8205728

FOREIGN FILINGS

NAME: BIRCHFIELD PENUEL & ASSOCIATES, LLC

·

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

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:

	EL & ASSOCIATES, LLC Limited Liability Company; must include "Limit	ed Liability Company," "L.L.C.," or "LLC	.")
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Fi	orida. The alternate name must include "Limited	Liability Company," "L.L.C." or "L.L.C.")
₂ Alabama	, , , , , , , , , , , , , , , , , , , ,	3.	,,,,, ,
(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)	
4	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration) nine penalty liability)	
5 2805 Crescent Ave, Suite 200		6 2805 Crescent Ave, Su	ite 200
(Street Address of Principal Office)		(Mailing A	
Birmingham, AL, US, 35209-2525		Birmingham, AL, US, 35	
			FO G
7. Name and street address	ss of Florida registered agent: (P.O. Bo	x NOT acceptable)	
Name:	Corporation Service Company		
Name.			
Office Address:	1201 Hays Street		25 (3)
	Tallahassee	, Florida 32301	
	(City)	(Zip	code)
to comply with the provisi	tion, I hereby accept the appointment of the prope is of all statutes relative to the prope is of my position as registered agent.		
	(Registered agent's	s signature)	
8. The name, title or capa	acity and address of the person(s) who h	as/have authority to manage is/are	:
Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
AMBR	Charles E. Penuel	AMBR	Russell Realmuto
	2805 Crescent Ave Suite 200		2805 Crascent Ave Suite 200
	Birmingham,AL,35209-2525	_	Birmingham, AL, 35209-2525
AMBR	Joseph Aboujaoude	AMBR	Alan Crotwell
	2805 Crescent Ave Suite 200		2805 Crescent Ave Suite 200
	Berningham,AL,35200-2525	_ .	Birmingham AL,35209-2525
	of existence, no more than 90 days old of which it is organized. (If the certifical ubmitted)		
10. This document is exec	uted in accordance with section 605.020	·	vare 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.

Typed or printed name of signee

Charles E. Penuel

Article 8 Cont'

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

Title or Capacity:

AMBR

Name and Address:

Wallace Williams

2805 Crescent Ave Suite 200 Birmingham, AL, 35209-2525 John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Birchfield Penuel & Associates, LLC was formed in Jefferson County, Alabama on January 2, 2002. The Alabama Entity Identification number for this entity is 679-557. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



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In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

08/01/2018

Date

J. H. Menill

John H. Merrill

Secretary of State