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(Requestor's Name)	
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PICK-UP WAIT MAIL	
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Special Instructions to Filing Officer:	
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SECRETARY OF STATE
SECRETARY OF STATE

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N CULLIGANI SEP 1 8 2018

### COVER LETTER ...

TO:		ion Section of Corporation	as .				
SUBJE			Company, LLC				
CODOL	.c.r		Name of	Limited Liability C	ompany		
			eign Limited Liability Comp d to register the above refer				
Please	return all co	orrespondence c	oncerning this matter to the	following:			
		Erin Bikoff					
	•		N'	ame of Person			
		Schreeder, Who	eeler & Flint, LLP				
	-		F	irm/Company			
		1100 Peachtree	St. NE, Suite 800				
	•			Address		<u> </u>	
•		Atlanta, GA 30	309				
	-		City/S	tate and Zip Code			
	el	oikoff@swfllp.c	com				
	<del></del>	<del></del>	E-mail address: (to be use	d for future annual r	report not	ification)	
For fur	ther inform	ation concerning	g this matter, please call:				
	Erin	Bikoff		_ at (404	954-	9850	
		Name o	f Contact Person	Area Code	Day	time Telephone Number	
	Division of Registrati P.O. Box	G ADDRESS: of Corporations on Section 6327 ee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding recutive Center Circle see, FL 32301	
Enclose		k for the follow O Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Certified Copy	g Fee &	S160.00 Filing Fee, Ce of Status & Certified Cop	

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTIES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. UMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

		Limited Liability Company; must include "L			
(If na	me imavailable, enter alternate i	name adopted for the purpose of transacting business	in Florida. The alterna	nte name must include "Limited Liz	ability Company," "L.L.C," or "LLC.")
2. G	Georgia		3	·	
	(Jurisdiction under the law of w	luch foreign limited liability company is organized)		(FEI num	ber, if applicable)
4					
·•• -		(Date first transacted business in Florida, if p (See sections 605,0901 & 605,0905, F.S. to c	rior to registration.)	lity1	<del></del>
	210 Sandu Saringa Die	,	, -	0 Sandy Springs Place	
5	210 Sandy Springs Pla (Street Address of	Principal Office)	6. 21	(Mailing Add	dress)
1	Atlanta, GA 30328		At	lanta, GA 30328	
_					70
-		·	-		
7. ነ	Name and street addres	ss of Florida registered agent: (P.O.	Box NOT acco	eptable)	2018 SEP 14 PH 12: 39 SECRETARY OF STATE SALLAHASSEE, FI ORIO
	Name:	Paracorp Incorporated			\$ 12.55 1.75 1.75 1.75 1.75 1.75 1.75 1.75 1
	Office Address:	155 Office Plaza Drive, 1st Floor			PR
		Tallahassee		, Florida <u>32301</u>	1 n : 12:
		(Ciry)		(Zip coo	10 E W
		s of my position as registered agent		Moua, Assistant Secreta	гу
		(Registres a	<b></b>		
8.	The name, title or capa Title or Capacity:	acity and address of the person(s) wh  Name and Address:	no has/have auti	nority to manage is/are: or Capacity:	Name and Address:
8.	Title or Capacity:	acity and address of the person(s) wh  Name and Address:	no has/have auti		Name and Address:
8.		acity and address of the person(s) wh	no has/have auti		Name and Address:
8.	Title or Capacity:	acity and address of the person(s) wh  Name and Address:  James A. Berry	no has/have auti		Name and Address:
8.	Title or Capacity:	nacity and address of the person(s) wh  Name and Address:  James A. Berry  210 Sandy Springs Place	no has/have auti		Name and Address:
8.	Title or Capacity:	nacity and address of the person(s) wh  Name and Address:  James A. Berry  210 Sandy Springs Place	no has/have auti		Name and Address:
8.	Title or Capacity:	nacity and address of the person(s) wh  Name and Address:  James A. Berry  210 Sandy Springs Place	no has/have auti		Name and Address:
	Title or Capacity: MGR	Address of the person(s) when Name and Address:  James A. Berry  210 Sandy Springs Place  Attanta, GA 30328	no has/have auti		Name and Address:
(Us	Title or Capacity:  MGR  se attachments if neces	Acity and address of the person(s) when Name and Address:  James A. Berry  210 Sandy Springs Place Attanta, GA 30328	no has/have auth	or Capacity:	
(Us 9. A juris	MGR  MGR  Title or Capacity:  MGR  The attachments if neces  Attached is a certificate sediction under the law	James A. Berry  210 Sandy Springs Place Attanta, GA 30328  sary)  of existence, no more than 90 days of which it is organized. (If the certi	no has/have auth	or Capacity:	aving custody of records in the
(Us 9. A juris	MGR  MGR  Title or Capacity:  MGR  The attachments if neces attached is a certificate addiction under the law the translator must be so	James A. Berry  210 Sandy Springs Place Attanta, GA 30328  sary)  of existence, no more than 90 days of which it is organized. (If the certium in the content of the certium in the certiu	old, duly auther	or Capacity:  nticated by the official ha	aving custody of records in the tion of the certificate under oath
(Us 9. A juris of th	Title or Capacity:  MGR  The attachments if neces attached is a certificate addiction under the lawne translator must be some	James A. Berry  210 Sandy Springs Place Attanta, GA 30328  sary)  of existence, no more than 90 days of which it is organized. (If the certi	old, duly auther ficate is in a for	or Capacity:  nticated by the official had beign language, a translate orida Statutes. I am away	aving custody of records in the tion of the certificate under oath
(Us 9. A juris of th	Title or Capacity:  MGR  The attachments if neces attached is a certificate addiction under the lawne translator must be some	James A. Berry  James A. Berry  210 Sandy Springs Place Attanta, GA 30328  sary)  of existence, no more than 90 days of which it is organized. (If the certiubmitted)  uted in accordance with section 605.	old, duly auther ficate is in a for	or Capacity:  nticated by the official had beign language, a translate orida Statutes. I am aware lony as provided for in	aving custody of records in the tion of the certificate under oath
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# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Title or Capacity:  MGR  James A. Berry  210 Sandy Springs Place Attanta GA 30328  Jee attachments if necessary)  Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records i isdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted)	Georgia	name adopted for the purpose of transacting bus.		
(Date first immastered between a Floods, of good to good a continuity penalty)  (Date first immastered between a Floods, of good to good a continuity penalty) labelity)  (Steen Address of Principal Office)  Atlanta, GA 30328  Name and street address of Principal Office)  Name:  Paracorp Incorporated  Office Address:  155 Office Plaza Drive, 1st Flood  Tallahassee  (Gip)  Florida 32301  Florida service of process for the above stated limited liability comparisat the signated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I furth comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familia d accept the obligations of my position as registered agent.  Registered agent's opasitive to manage is/are:  Title or Capacity:  Name and Address:  Name and Address:  Title or Capacity:  Name and Address:  Name and Address:  Title or Capacity:  Name and Address:  Name and Address:  Admina GA 30328  Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records is isdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted)			siness in Florida. The alternate name must include "Limite	d Liability Company," "L.I. C," or "LLC."
(Date for transacred bearess of Florida, if prior to regionation)  (Steen Address of Principal Office)  (Atlanta, GA 30328  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  Paracorp Incorporated  Office Address:  155 Office Plaza Drive. 1st Floor  Tallahassee  (Sign Steen amned as registered agent and to accept service of process for the above stated limited liability company at the signated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I furthcomply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familia, accept the obligations of my position as registered agent.  (Registered agent's ognature)  The name, title or capacity and address of the person(s) who has/have authority to manage is/arc:  Title or Capacity:  Name and Address:  Name and Address:  Title or Capacity:  Name and Address:  Name and Address:  Title or Capacity:  Name and Address:  Name and Address:  Name and Address:  Title or Capacity:  Name and Address:  Name and Address:  Name and Address:  Title or Capacity:  Name and Address:  Title or Capacity:  Name and Address:  N	(Jurisdiction under the law of v		3	
210 Sandy Springs Place (Stee Address of Pincipal Office) Atlanta, GA 30328  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Paracorp Incorporated Office Address: 155 Office Plaza Drive. 1st Floor Tallahassee (Gis) (Gis)  Florida 32301  (Gis)  gistered agent's acceptance: white been named as registered agent and to accept service of process for the above stated limited liability company of the comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familial diacept the obligations of my position as registered agent.  (Registered agent's operatore)  (Registered agent's		high foreign limited liability company is organiz	zed) (FEI	number, if applicable)
210 Sandy Springs Place (Stee Address of Pincipal Office) Atlanta, GA 30328  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Paracorp Incorporated Office Address: 155 Office Plaza Drive. 1st Floor Tallahassee (Gis) (Gis)  Florida 32301  (Gis)  gistered agent's acceptance: white been named as registered agent and to accept service of process for the above stated limited liability company of the comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familial diacept the obligations of my position as registered agent.  (Registered agent's operatore)  (Registered agent's				
210 Sandy Springs Place (Steen Address of Principal Office) Atlanta, GA 30328  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Paracorp Incorporated Office Address:  155 Office Plaza Drive. 1st Floor Tallahassee (Cus)  gistered agent's acceptance: (Cus)  gistered agent's acceptance: (Cus)  gistered agent and to accept service of process for the above stated limited liability company. I further comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familial diacept the obligations of my position as registered agent.  (Registered agent's operature)  The name, title or capacity and address of the person(s) who has/have authority to manage is/are:  Title or Capacity: Name and Address: Title or Capacity: Name and Address:  MGR  James A. Berry 210 Sanos Springs Place Atlanta GA 30328  Atlanta of a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records i sidiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the ranslator must be submitted)		(Date first transacted business in Florida,	i, if prior to registration )	<del></del>
Atlanta, GA 30328  Name:  Paracorp Incorporated  Office Address:  155 Office Plaza Drive, 1st Floor  Tallahassee  (Cus)	210 Sandy Springs Pl			pa .
Atlanta, GA 30328  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name: Paracorp Incorporated  Office Address: 155 Office Plaza Drive. 1st Floor  Tallahassee (Gip) Florida 32301  (Gip) (Gip) (Zip sode)  rigistered agent's acceptance: (Gip) (Zip sode)  rigistered agent's acceptance: (Gip) (Zip sode)  rigistered agent's acceptance agent and to accept service of process for the above stated limited liability company at the signated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familial diaccept the obligations of my position as registered agent.  (Registered agent's opnature)  The name, title or capacity and address of the person(s) who has/have authority to manage is/are:  Title or Capacity: Name and Address: Title or Capacity: Name and Address:  MGR  James A. Berry  210 Sonoy Springs Paco  Allanta GA 30328  Atlanta, GA 30328  Atlanta is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records is sidiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted)				
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James A. Berry  210 Sandy Springs Place Atlanta GA 30328   Jise attachments if necessary)  Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in isdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted)		(Kegister	ed agent s signature)	
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. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, I am aware that any false information	Title or Capacity:  MGR  Jse attachments if neces  Attached is a certificate is diction under the law	James A. Berry  210 Sandy Springs Place Attanta. GA 30328  ssary)  e of existence, no more than 90 da of which it is organized. (If the co	ays old, duly authenticated by the officia	l having custody of records in
bmitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	Title or Capacity:  MGR  Jse attachments if neces  Attached is a certificate risdiction under the law the translator must be s  . This document is exec	Name and Address:  James A. Berry  210 Sandy Springs Place Atlanta. GA 30328  ssary)  c of existence, no more than 90 da of which it is organized. (If the coubmitted)	ays old, duly authenticated by the officia ertificate is in a foreign language, a trans	Il having custody of records in slation of the certificate under
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Agnature of an authorized person	Title or Capacity:  MGR  Jese attachments if neces  Attached is a certificate isdiction under the law the translator must be s  This document is executed.	Sarry)  Reserve to fexistence, no more than 90 day of which it is organized. (If the coubmitted)  Reserve the Department of State constitution in the Department of State constitution is served.	ays old, duly authenticated by the officia ertificate is in a foreign language, a trans 605.0203 (1) (b). Florida Statutes, I am autes a third degree felony as provided for	Il having custody of records in slation of the certificate under ware that any false information in s.817.155, F.S.
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Typed or printed name of signee

Control Number: 18028475

## 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

#### RRB Management Company, 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 : 16221173 Date Inc/Auth/Filed: 03/06/2018 Jurisdiction : Georgia Print Date : 09/11/2018

Form Number : 211



Brian P. Kemp Secretary of State