

118000009038

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

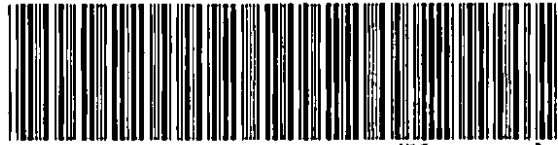
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900319309039

18 OCT -3 AM 10:51
TAXIATION
FBI

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 382107 5123330

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : September 11, 2018

ORDER TIME : 5:51 PM

ORDER NO. : 382107-015

CUSTOMER NO: 5123330

SEP 11 2018
5:51 PM
382107-015
5123330

FOREIGN FILINGS

NAME: XTIME, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____

COVER LETTER

**TO: Registration Section
Division of Corporations**

Xtime, LLC

SUBJECT: _____
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:

Barbara Williamson

Name of Person

Cox Enterprises, Inc.

Firm/Company

6205-A Peachtree Dunwoody Road

Address

Atlanta, GA 30328

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Barbara Williamson

678

645-0841

Name of Contact Person

at ()

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

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

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

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

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:

1. Xtime, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
XTIME-DE, LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")
2. Delaware 3. 77-0517208
(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 registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 6205-A Peachtree Dunwoody Road 6. 6205-A Peachtree Dunwoody Road
(Street Address of Principal Office) (Mailing Address)
Atlanta, GA Atlanta, GA
30328 30328

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (Zip code)

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 place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: Roxanne Turner
(Registered agent's signature)

Roxanne Turner
Asst. Vice President

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

| <u>Title or Capacity:</u> | <u>Name and Address:</u> | <u>Title or Capacity:</u> | <u>Name and Address:</u> |
|---------------------------|--------------------------|---------------------------|--------------------------|
| <u>See Attached Rider</u> | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records 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 oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203, (1) (b), Florida Statutes. I am aware 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.

Juliette W. Pryor
Signature of an authorized person
Juliette W. Pryor, Secretary
Typed or printed name of signer

Xtime, LLC

Date
09/10/2018

Company Profile

Tax ID
Charter No. 5191843

Main Details

Name: Xtime, LLC
QuickRef: XTIME
Country: United States
Region: Delaware
Tax ID: 77-0517208
Incorporated: 08/07/2012
Company Type: Limited Liability Company
Company Status: Active
Dissolved:

Primary Addresses

Principal Office: 6205-A Peachtree Dunwoody Rd., Atlanta, GA, 30328, USA
Mailing Address: 6205-A Peachtree Dunwoody Rd., Atlanta, GA, 30328, USA

Accounting Dates

Accounting Dates:

| Last Period End | Current Period End | Last Extended |
|-----------------|--------------------|---------------|
| | | |

Appointments

Board Positions

| Name | QuickRef | Position | Appointed | Job Title |
|------------------------|--------------|----------|------------|-----------|
| * Bowser, Mark F. | BOWSER-MF | Director | 12/04/2017 | Director |
| * Friedman, Maria L. | FRIEDMA-CORP | Director | 10/11/2016 | Director |
| * Schwartz, Sanford H. | SCHWART-SH | Director | 11/18/2014 | Director |

Officers

| Name | QuickRef | Position | Appointed | Job Title |
|------------------------|--------------|----------------------------|------------|----------------------------|
| * Schwartz, Sanford H. | SCHWART-SH | President | 11/18/2014 | President |
| * Vickers, Mary A. | VICKERS-M | Vice President | 11/18/2014 | Vice President |
| * Bowser, Mark F. | BOWSER-MF | Vice President | 12/04/2017 | Vice President |
| * O'Neil, Mark F. | ONEIL-M | Vice President | 10/11/2016 | Vice President |
| * Friedman, Maria L. | FRIEDMA-CORP | Vice President & Treasurer | 11/18/2014 | Vice President & Treasurer |
| * Pryor, Juliette W. | PRYOR-JW | Secretary | 10/11/2016 | Secretary |

* - 6205-A Peachtree Dunwoody Road
Atlanta, GA 30328

Delaware

The First State

Page 1

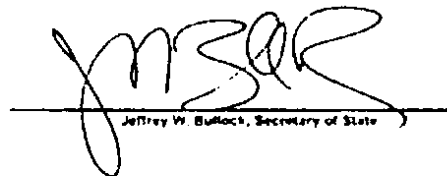
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "XTIME, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF SEPTEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "XTIME, LLC" WAS FORMED ON THE SEVENTH DAY OF AUGUST, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

603 OCT -3 A 10:09
11:57




Jeffrey W. Bullock, Secretary of State

5191843 8300

SR# 20186603121

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203401192

Date: 09-11-18