10/31/2018

Division of Corporations

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Foreign Limited Liability Company Martin Center for ABA Services, LLC

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S. PRATHER

To: Page 3 of 5

		COA	ER LETTER		
	gistration Section vision of Corporation	3			
enib ibzyr.	Martin Center for A	BA Services, LLC			
SUBJECT:		Name of 1	imited Liability C	Сотралу	
The enclose Existence, a	d "Application by For and check are submitted	eign Limited Liability Comp d to register the above refere	any for Authoriza nced foreign limit	tion to Tra ed liability	nsact Business in Florida," Certificate o company to transact business in Florida
Please retur	n all correspondence c	oncerning this matter to the	following:		
	Cheyenne Mose	sley			
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		Ciry/S	tate and Zip Code		
	dgmartin 1716@	-			
		E-mail address: (to be user	for future annual	report not	ification)
For further	information concernin	g this matter, please call:			
С	heyenne Moselcy		800 at (773-08	88 ext9724
	Name o	of Contact Person	Area Code	Day	rtime Telephone Number
Di Re P.	AILING ADDRESS; ivision of Corporations egistration Section O. Box 6327 illahassee, FL 32314			Division Registrat Clifton B 2661 Exe	r ADDRESS: of Corporations ion Section duilding ecutive Center Circle see, FL 32301
	a check for the follow \$125.00 Filing Fee	eing amount: \$\Boxed{\subseteq} \preceq 130.00 \text{ Filing Fcc & Certificate of Status}\$	\$155.00 Filin Certified Copy		☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

Martin Center for ABA	Services, LLC					
(Name of Foreign	Limited Liability Company; must include "Limit	ted Liability	Company," "L.L.C.," or "(.L.C.,")			
nume unavadable, enter alternate of	ame adopted for the purpose of transacting business in F	lorida. The alte	amate name must unclude "Lumited Liab	ntity Company,	" L.L.C," o	"1J.C."}
TN			46-3004088			
(Jurisdiction under the law of wh	nich freeign limited hability company is organized)		(FEI numb	er, if applicable	i)	
	Chair first transacted business in Florida if relact	n registration.				
	(Date first transacted business in Florida, if pilor i (See sections 605 0904 & 603 0905, F.S. to deter-		ability)			
(Street Address of P	rincipal Office)	6	(Mailing Addr	*tu)		~
291 CLEAR SKY CT	STE C	_	14528 MANCHESTER DR	t	<u>بئ</u> 	201 8
CLARKSVILLE, TN 3	37043	_	NAPLES, FL 34114		<u> 25. </u>	<u> </u>
						끜
Name and street addres	ss of Florida registered agent: (P.O. Bo	x <u>NOT</u> a	cceptable)			ω
Name:	DAVID MARTIN				ST.	~~
ranc.	LICON MANICUESTED IN				<u> </u>	7
Office Address:	14528 MANCHESTER DR.					ڢ
	NAPLES		, Florida 34114	- 	ート	ဟ္
	(City)		tarp cou	-1	1 * *	_
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Division of Business Services Department of State

State of Tennessee 312 Rosa L. Parks AVE, 6th FL: Nashville, TN 37243-1102

DAVID MARTIN 14528 MANCHESTER DRIVE NAPLES, FL 34114

October:16, 2018

\$20.00

Request Type: Certificate of Existence/Authorization

Request #: 0292876 Issuance Date: 10/16/2018

Copies Requested:

Document Receipt

Receipt #: 004334362

\$20.00 Filing Fee:

Payment-Credit Card - State Payment Center - CC #: 3741856867

Regarding:

Martin Center for ABA Services, LLC

Limited Liability Company - Domestic Filing Type: Formation/Qualification Date: .05/31/2013

Active

Duration Term:

Perpetual

Business County: MONTGOMERY COUNTY

Control # .:

721187

05/31/2013

Date Formed: Formation Locale: TENNESSEE

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Martin Center for ABA Services, LLC

- * is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization. of the business;
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

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