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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO:

TO:	Registration Section Division of Corporations		•	•	
SUBJI	Swan & Sparrow Travel LLC				
		of Limited Liability (Company		
The en Exister	closed "Application by Foreign Limited Liability Conce, and check are submitted to register the above ref	mpany for Authoriza ferenced foreign limit	ation to Transact Busines ted liability company to	ss in Florida," Certificate of tran sac t business in Florida	
Please	return all correspondence concerning this matter to t	he following:			
	Shelley Jennings				
		Name of Person			
	Swan & Sparrow Travel				
Firm/Company					
	625 Bakers Bridge Ave Suite 105			_	
	Franklin, TN 37067			7000	
	City	y/State and Zip Code		001	
	info@swanandsparrowtravel.com			22	
	E-mail address: (to be u	ised for future annual	report notification)	7	
For fur	ther information concerning this matter, please call:				
	Shelley Jennings	615 at (491-7911 _) _		
	Name of Contact Person	Area Code	Daytime Telepho	ne Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporatio Registration Section Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns · Circle	
Enclos	ed is a check for the following amount: \$\Boxed{\Boxes} \$125.00 \text{ Filing Fee } \Boxed{\Boxes} \$130.00 \text{ Filing Fee & Certificate of Status}	e □ \$155.00 Filir Certified Copy	Ç	Filing Fee, Certificate Certified Copy	

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:

1. Swan & Sparrow Trave (Name of Foreign	ELLC Limited Liability Company; must include "Limit	ed Liability Co	mpany," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Fl	orida The alterna	te name must include "Limited Liab	ality Company," "L.L.C," or "LLC.")
			-3149465	
2. Williamson Cty, TN (Jurisdiction under the law of which foreign limited liability company is organized)			(FEI numb	er, if applicable)
4 July 2018				
T	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determ		ıty)	
5 625 Bakers Bridge Ave	e	6. Sar	ne as street	
(Street Address of F	Principal (Hlice)	*· <u></u>	(Mailing Addr	css)
Suite 105				
Franklin, TN 37067	· · · · · · · · · · · · · · · · · · ·			
	ss of Florida registered agent: (P.O. Bo: Registered Agents Inc.	x <u>NOT</u> acce	ptable)	
Name:				
Office Address:	3030 N. Rocky Point Dr. Suite 150A			
	Tampa		, Florida <u>33607</u>	
to comply with the provisi	tion, I hereby accept the appointment ions of all statutes relative to the propes of my position as registered agent. (Registered agent)	r and compl	ete performance of my o	luties, and I am familiar with
		,		." Na
8. The name, title or capa <u>Title or Capacity:</u>	acity and address of the person(s) who h Name and Address:		ority to manage 1s/are: or Capacity:	Name and Address:
Owner	ShelleyJennings			
	6121.Silverado			<u> </u>
	Franklin, Tn			2 7
Owner	Like Linnings			
<u> </u>	John Jennings same as above	- -	 -	: :: : : : : : : : : : : : : : : : : :
				
(Use attachments if neces	sary)			
9. Attached is a certificate jurisdiction under the law of the translator must be s	of existence, no more than 90 days old of which it is organized. (If the certifical ubmitted)	, duly authen ite is in a for	nticated by the official ha eign language, a translati	ving custody of records in the ion of the certificate under oath
10. This document is exec submitted in a document to	tuted in accordance with section 605.020 the Department of State constitutes a the	hird degree f	elony as provided for in s	e that any false information 5,817,155, F.S.
	Signatur	re of an authorized	i person	

Typed or printed name of signee

Shelley Jennings



Division of Business Services Department of State

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

SWAN & SPARROW TRAVEL LLC

SUITE 105 625 BAKERS BRIDGE AVENUE

Request Type: Certificate of Existence/Authorization

Request #:

FRANKLIN, TN 37067

0292516

Issuance Date: 10/11/2018

Copies Requested:

October 11, 2018

Document Receipt

Receipt #: 004329254

Payment-Credit Card - State Payment Center - CC #: 3741590657

Filing Fee:

\$20.00

\$20.00

Regarding:

SWAN & SPARROW TRAVEL LLC

Filing Type:

Limited Liability Company - Domestic

Formation/Qualification Date: 10/20/2017

Status:

Active

Duration Term: Perpetual

Business County: WILLIAMSON COUNTY

Control #: Date Formed: 928472

Formation Locale: TENNESSEE

10/20/2017

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

SWAN & SPARROW TRAVEL 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

Verification #: 030006716

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