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(Requestor's Name)				
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(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



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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Name: M	ICHAEL PETERSON	_			
Reference #:		<u> </u>			
Entity Name:	ECM-76-FORT	MYERS, FL-2-UT, LLC			
✓ Articles	of Incorporation/Authorizatio	n to Transact Business			
Amendn	nent				
Change of Agent					
☐ Reinstat	ement	DEC			
☐ Convers	sion	20 60			
☐ Merger		PH 2: 01			
☐ Dissolut	ion/Withdrawal	0 7			
Fictitious	s Name				
Other					
Authorized Ame	oung \$ 125	<u></u>			

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COVER LETTER

TO:	Registration Section Division of Corporations					
end II	ECM-76-Fort Mye	ers, FL-2-UT, LLC				
30031	Name of Limited Liability Company					
The en	sclosed "Application by Foreign Limited Liability Compan nce, and check are submitted to register the above referenc	y for Authorization to Transact Business in Florida," Certificate of ed foreign limited liability company to transact business in Florida.				
Please	return all correspondence concerning this matter to the fol	lowing:				
	Stephanie Williams					
	Name of Person					
	Embree Asset Group Inc					
	Firm/Company					
	4747 Wi	lliams Drive				
	<u> </u>	Address				
	Georgetown, TX 78633					
	City/State and Zip Code					
	swilliams@embreegroup.com					
	E-mail address: (to be used for	or future annual report notification)				
For fu	rther information concerning this matter, please call:					
	Stephanie Williams	at (512) 819-4735 Area Code Daytime Telephone Number				
	Name of Contact Person	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				
Enclos	sed is a check for the following amount: \$\sum_\$\$ \$125.00 \text{ Filing Fee} \sum_\$\$130.00 \text{ Filing Fee & Certificate of Status}	\$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy				

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

IN CONIPLIANCE 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: ECM-76-Fort Myers, FL-2-UT, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LUC.") (If name unavailable, order alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company." "L L C." or "LLC.") (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 4747 Williams Drive 4747 Williams Drive (Street Address of Principal Office) Georgetown, TX 78633 Georgetown, TX 78633 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Cogency Global Inc Name: 115 North Calhoun St Suite 4 Tallahassee , Florida 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.

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Name and Address: Title or Capacity: Embree Capital Markets Inc. Manager (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), Elorida 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. Rocky Hardin CFO



Utah Department of Commerce

Division of Corporations & Commercial Code

160 East 300 South, 2nd Floor, PO Box 146705 Salt Lake City, UT 84114-6705 Service Center: (801) 530-4849 Toll Free: (877) 526-3994 Utah Residents

Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov

12/26/2018 11090531-016012262018-793476

CERTIFICATE OF EXISTENCE

Registration Number:

11090531-0160

Business Name:

ECM-76-FORT MYERS, FL-2-UT, LLC

Registered Date: Entity Type:

December 11, 2018 LLC - Domestic

Status:

Current

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



Som Stupe

Jason Sterzer Director

Division of Corporations and Commercial Code