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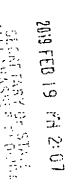
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M. MILLIGAN MAR 04

COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: ADG Ocala, LLC
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:
Robin Hogland, Paralegal
Name of Person
Maynard, Cooper & Gale, P.C.
Firm/Company
1901 6th Avenue North, Suite 2400
Address
Birmingham, AL 35203
City/State and Zip Code
rhogland@maynardcooper.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Robin Hogland at (205) 488-3554
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
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE
\$125.00 Filing Fee \$\Bigcup \\$130.00 Filing Fee & Certificate of Status \$\Bigcup \text{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:

. ADG Ocala, LLC (Name of Foreign	Limited Liability Company; must include "Limite	d Liabilit	y Company," "L.L.C	.," or "LLC.")	
VA					
derne ussavallable, enter alternate r	ame adopted for the purpose of transacting business in Plot	rida. The s	lt ernate name must fuch	ale "Limited Liability Company." "	'L.L.C." or "LLC."
Alabama		3.	N/A		
(Jurisdiction under the law of which foreign limited liability company is organized)		٥.		(PEI number, if applicable)	
Upon qualification					
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine	registratics ne penalty	i) liability)		
728 Shades Creek Pkwy		6	728 Shades Cre	æk Pkwy	
(Street Address of	riscipal Office)	0.		(Mailing Address)	
Suite 130			Suite 130		
Birmingham, AL 3520	9		Birmingham, A	L 35209	
Name and street address	s of Florida registered agent: (P.O. Box	NOT :	acceptable)		··· ···
					54); F= []
Name:	CAPITOL CORPORATE SERVICES	, INC.		•	53 33
Office Address:	515 EAST PARK AVENUE 2ND FL		 .		
	TALLAHASSEE		, Florida	32301	* 3*
	(Citv)			(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 gosition as registered agent.

Sadi Boyette, Assistant Secretary on behalf of Capaol Corporate Services, Inc.

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Title or Capacity: Title or Capacity: Name and Address: Name and Address: Belterra Partners, LLC Manager Name: Manager Name: 728 Shades Creek Pkwy Member Address: Member Address: _____ Suite 130 ■ Authorized ■ Authorized Birmingham, AL 35209 Person Person Other_ Other_ Other_ Other_ John R. Miller, IV Manager Name: Manager 728 Shades Creek Pkwy ■ Member Address: ☐ Member Suite 130 Authorized Authorized Birmingham, AL 35209 Person Person Other_ Other Other Other Manager Name: Manager Member Address: Member Address: ■ Authorized ☐ Authorized Person Person Other_ Other____ Other Other_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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. Signature of an authorized person

John R. Miller, IV, as Manager of ADG Ocala, LLC

Typed or printed name of signee

John H. Merrill Secretary of State

P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that ADG Ocala, LLC was formed in Jefferson County, Alabama on February 8, 2019. The Alabama Entity Identification number for this entity is 542-821. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



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In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

02/14/2019

Date

J. W. Menill

John H. Merrill

Secretary of State