

# M19000002ISS

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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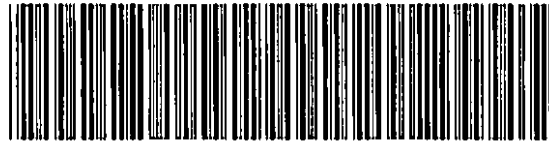
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2019 MAR -4 P 10:43  
FBI - MEMPHIS

3/4/19 QS

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ELM Group LLC d/b/a E S J Contractors, 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:

Joe Meals  
Name of Person

ELM Group LLC  
Firm/Company

5407 N. Angela Rd  
Address

Memphis, TN 38120  
City/State and Zip Code

jmeals@elmgroup.us  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joe Meals at (901) 568-9912  
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    ☒ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

FILED  
2019 APR -4 PM 3:43  
TALLAHASSEE, FL

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. ~~ESJ Contractors, LLC~~ ELM Group LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

ESJ Contractors, 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. TN  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 47-4791301  
(FEI number, if applicable)

4. NONE TO DATE  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. ELM Group LLC  
(Street Address of Principal Office)

6. ELM Group LLC  
(Mailing Address)

1779 Kirby Pkwy # 1575

5401 N Angela Rd

Memphis, TN 38138

Memphis, TN 38125

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

Name: Jeff Findlay

Office Address: 4312 Valentine Ave

The Villages, Florida 32163  
(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.

Jeff Findlay  
(Registered agent's signature)

2019 JUN -14 PM 3:43  
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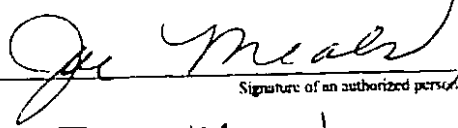
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>ERIC TABOIZ</u>	<input type="checkbox"/> Manager	Name: <u>Joe meals</u>
<input checked="" type="checkbox"/> Member	Address: <u>1779 Kirby Pkwy</u>	<input checked="" type="checkbox"/> Member	Address: <u>5407 N Angela</u>
<input type="checkbox"/> Authorized	<u>Ste 128</u>	<input type="checkbox"/> Authorized	<u>Memphis, TN 38120</u>
Person	<u>Memphis, TN 38138</u>	Person	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name: <u>Steve Price</u>	<input type="checkbox"/> Manager	Name: _____
<input checked="" type="checkbox"/> Member	Address: <u>1779 Kirby Pkwy #1575</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	<u>Memphis, TN 38138</u>	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed 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.

 SECRETARY / CFO  
Signature of an authorized person  
Joe Meals  
Typed or printed name of signee



**Tre Hargett**  
Secretary of State

**Division of Business Services**  
**Department of State**  
State of Tennessee  
312 Rosa L. Parks AVE. 6th FL  
Nashville, TN 37243-1102

**JOE MEALS**  
5407 N ANGELA RD  
MEMPHIS, TN 38120

February 26, 2019

**Request Type: Certificate of Existence/Authorization**

Request #: 0307178

Issuance Date: 02/26/2019

Copies Requested: 1

**Document Receipt**

Receipt #: 004573739

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3751114560

\$20.00

**Regarding: ELM Group, LLC**

Filing Type: Limited Liability Company - Domestic

Formation/Qualification Date: 07/28/2015

Status: Active

Duration Term: Perpetual

Business County: SHELBY COUNTY

Control #: 808029

Date Formed: 07/28/2015

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

**ELM Group, 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.

Tre Hargett  
Secretary of State

Processed By: Cert Web User

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