M90W02724

(Requestor's Name)	<u></u>
	(Address)	
((Address)	
	City/State/Zip/Phone #)	
PICK-UP	MAIT	MAIL
((Business Entity Name)	····
	(Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions	to Filing Officer:	

Office Use Only



500326647945

2819 HAN 20 CO 15 19 MAR 20 AM IN 149

3/21/19 Qs

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

REFERENCE: 690750 7936809

AUTHORIZATION _

COST LIMIT (/\\$\)155.00

ORDER DATE: March 19, 2019

ORDER TIME : 10:29 AM

ORDER NO. : 690750-005

CUSTOMER NO: 7936809

FOREIGN FILINGS

NAME: SANMARC, LLC

 \underline{XXXX} QUALIFICATION (TYPE: \underline{LL})

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

COVER LETTER

TO:

Registration Section

Div	ision of Corporation	S						
SUBJECT:	SANMARC, LLC							
	Name of Limited Liability Company							
		eign Limited Liability Company for Authorization to Trans to register the above referenced foreign limited liability c						
Please return	all correspondence co	oncerning this matter to the following:						
	Cathy Crittende	n						
		Name of Person						
	Balch & Bingha	m LLP						
		Firm/Company						
	PO Box 306							
		Address	(04 8)					
	Birmingham, Al	. 35201						
		City/State and Zip Code	 , (
	rfaulkner@harber	t.net						
		E-mail address: (to be used for future annual report notification)	cation)					
For further in	nformation concerning	this matter, please call:						
Cat	hy Crittenden	205 488-5550 at ()						
	Name of		ne Telephone Number					
Div Reg P.O	ision of Corporations istration Section Box 6327 ahassee, FL 32314	Registration Clifton Buil	Corporations Section ding tive Center Circle					
	losed is a check for the	e following amount: e to: FLORIDA DEPARTMENT OF STATE						
	\$125.00 Filing Fee	S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status	\$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 FOILOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	Limited Liability Company; must include "Limit	ed Liabilit	ty Company," "L. L.C.," or "LLC.")		
				51 ,	200
name unavailable, enter alternate n	name adopted for the purpose of transacting business in F	onda. The a	lternate name must include "Limited Liability	Company."	"L.E.C.," or
Delaware					, m
	high foreign limited liability company is organized)	3.		- 33.	
(Jurisdiction under the law of w	high foreign limited liability company is organized)		(FEI number, if	applicable)	
				•	ر.
					_
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to detern	registration	n.)		 ئن
	(See sections 60) 0904 & 603,0903, F S, to deter	mine penaity	naomy)		
2 North 20th Street, Suite 1700			2 North 20th Street, Suite 1700)	
(Street Address of I	Principal Office)	6.	(Mailing Address)		
			, ,		
Birmingham, AL 3520	3		Birmingham, AL 35203		
					
					
					_
Name and street addres	ss of Florida registered agent: (P.O. Bo	x NOT a	acceptable)		
Name and street addres	ss of Florida registered agent: (P.O. Bo	x <u>NOT</u> :	acceptable)		
Name and street addres	- , ,	х <u>NOT</u> :	acceptable)		
-	ss of Florida registered agent: (P.O. Bo Corporation Service Company	x <u>NOT</u> :	acceptable)		
Name and street address Name:	- , ,	x <u>NOT</u> :	acceptable)		
	Corporation Service Company	x <u>NOT</u> :	acceptable)	_	
	- , ,	x <u>NOT</u> :	acceptable)		
Name:	Corporation Service Company 1201 Hays Street	x <u>NOT</u> :			
Name:	Corporation Service Company	x <u>NOT</u> :	acceptable) 32301		

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.

Roxanne Turner

Asst. Vice President
(Registered agent's signature)

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: Name and Address: Title or Capacity: Name and Address: Harbert Realty Services, LLC David R. Williams Manager Manager Manager Name: 2100 3rd Ave. N., Suite 600 2100 3rd Ave. N., Suite 600 Address: ■ Member ☐ Member Address: Birmingham, AL 35203 Birmingham, AL 35203 Authorized Authorized Person Person Other____ Other_____ Other___ Manager Name: _____ Manager Name: __ ☐ Member Address: _____ __ __ ___ Member Address: Authorized Authorized Person Person Other Other_____ Other Other Manager Name: ______ Manager Name: 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 Degartment of State constitutes a third degree felony as provided for in s.817.155, F.S. Signature of an authorized person David R. Williams

Typed or printed name of signee

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SANMARC, LLC" IS DULY FORMED UNDER THE

LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A

LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF

THE TWENTIETH DAY OF MARCH, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SANMARC, LLC"
WAS FORMED ON THE NINETEENTH DAY OF MARCH, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 202477145

Date: 03-20-19

7333662 8300 SR# 20192119176