# 1119000003136

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#### COVER LETTER

TO:		ration Section on of Corporations						
SUBJE		ARGO OUTPARCEL LLC						
30 <b>D</b> 0.	<u> </u>	Name of Limited Liability Company						
		Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of 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:						
		Terri C. Justice						
	Name of Person							
		Market Development Corporation						
		Firm/Company						
		4200 Northside Parkway, NW, Building Two, Suite 200						
		Address						
		Atlanta, GA 30327  City/State and Zip Code	į					
		City/State and Zip Code						
	_	mn@mdcga.com	1					
For fur	ther infor	rmation concerning this matter, please call:	15554.					
	Terri C	ده کون						
		Name of Contact Person Area Code Daytime Telephone Number						
	Division Registra P.O. Bo	ING ADDRESS: on of Corporations Division of Corporations ration Section Registration Section Ox 6327 Clifton Building assee, FL 32314 Cleft Executive Center Circle Tallahassee, FL 32301						
	Please n	ed is a check for the following amount: make check payable to: FLORIDA DEPARTMENT OF STATE  25.00 Filing Fee \$\Bigsquare \text{\$130.00 Filing Fee & Dertificate of Status} \text{\$155.00 Filing Fee & Dertificate of Status} \text{\$25.00 Filing Fee & Certified Copy} \text{\$160.00 Filing Fee, Certified Copy}	e					

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

IN COMPLIANCE WITH SEL COMPANY TO TRANSACT B	CTION 605.0902, FLORIDA STATUTES, THE F PUSINESS IN THE STATE OF FLORIDA:	OLLOW	ING IS SUBMITTED TO REGISTER A	FOREIGN LI	MITED I	LIABILITY
LARGO OUTPARCE						
(Name of Foreign	n Limited Liability Company; must include "Limit	ed Liebili	ty Company," "L.L.C.," or "LLC.")		<del></del>	
LARGO OUTPARCEL	(GEORIGA) LLC					
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in Flo	orida. The s	lternate name must include "Limited Liability C	ompany," "L.L.C,	- ~ "LLC	<del>ن</del>
GEORGIA			58-2554476			
2. (Jurisdiction under the law of which foreign hunted liability company is organized)			3. (FEI number, if applicable)			
UPON REGISTRAT						
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration	iability)	-		
4200 Northside Park	<del>-</del>	6.	4200 Northside Parkway, NV	I		
(Street Address of	Principal Office)	0.	(Mailing Address)	· <b>-</b>		
Building Two, Suite 2	200		Building Two, Suite 200	SE	2019	CHICKET THE PARTY OF THE PARTY
Atlanta, GA 30327			Atlanta, GA 30327	カルス カルス カルス カルス カルス カルス カルス カルス カルス カルス	HAR ID	
7. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT a	acceptable)	SEC FLO	) PH -:	M
Name:	C T CORPORATION SYSTEM			LORIDA LORIDA	ဗာ	
Office Address:	1200 South Pine Island Road		·			
	Plantation		33324 , Florida			
	(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.

alcie Paulzerp, Asst Sec. CT Corporation System

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: Terri C. Justice Name: Joel S. Langsfeld Manager Manager 4200 Northside Parkway 4200 Northside Parkway Member Address: Member Address: Building Two, Suite 200 Building Two, Suite 200 Authorized Authorized Atlanta, GA 30327 Atlanta, GA 30327 Person Person Other Other\_\_\_ Other\_ Other\_\_\_\_ Mernie Huttman John B. Davidson Manager Name: Name: Manager | 4200 Northside Parkway 4200 Northside Parkway Address: Member Member Address: Building Two, Suite 200 Building Two, Suite 200 Authorized Authorized Atlanta, GA 30327 Atlanta, GA 30327 Person Person Other Other Other\_\_ Robert L. Gautier Manager Manager Name: \_ 4200 Northside Parkway Member Address: Member Address: Building Two, Suite 200 Authorized Authorized Atlanta, GA 30327 Person Person 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-

Typed or printed name of signee

Joel S. Langsfeld

Control Number: 19035246

## STATE OF GEORGIA

### Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

A Domestic Limited Hability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annual and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 16887045 Date Inc/Auth/Filed: 03/13/2019 Jurisdiction : Georgia Print Date : 03/18/2019

Form Number : 211



Brad Rafforaperger

Brad Raffensperger Secretary of State