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02/25/19--01028--012 **125.00







FLORIDA DEPARTMENT OF STATE Division of Corporations

March 11, 2019

ANNA GABRIELSEN 3740 DAVINCI CT SUITE 100 PEACHTREE CORNERS, GA 30092

SUBJECT: LEVEL-UP TOWERS, LLC Ref. Number: W19000023185

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We have received your document for LEVEL-UP TOWERS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 419A00004841

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COVER LETTER

TO: **Registration Section Division of Corporations**

Level-Up Towers, LLC

SUBJECT:

For further

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:

Anna Gabrielsen							
	Name	e of Person	··· ···				
Foresite Group, Inc	2.						
	Firm	Company			2.		
3740 Davinci Ct, S	uite 100				· -	019	
	A	ddress					
Peachtree Corners,	GA 30092			г. Г.	• •	\sim	
	City/State	and Zip Code	;	· · · · · · · · · · · · · · · · · · ·		<u></u>	
licensing@fg-inc.net				1-		υ L	
her information concerning th Anna Gabrielsen		770	368-1399				
Name of Co	a a a a a a a a a a a a a a a a a a a	Area Code	Daytime	Telephone Ni	umbe	r	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			STREET AD Division of Co Registration S Clifton Buildin 2661 Executiv Tallahassee, F	prporations ection ng re Center Circl	le		
Enclosed is a check for the for Please make check payable to \$125.00 Filing Fee		\$155.00	Filing Fee &				Certificate
	Centricate of Status	Cenin	ed Copy	of Statu	5 & C	Lentified	Сору

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

IN COMPLIANCE WITH SECTION 695,0902, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN-LIMITED HABILITY. COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1	Level-Up Towers, LLC	
•••		

 Giame of Loreign I	limited Erability C	lompany, must mel-	ade "Limited Liability	y Company," "E.L	C C _" of "1 LC ")	

2.	Georgia		,	83-3242287				
	(Jurisdiction under the law of w	nich foreien lämted basalty company is sugarized)	5.		H Lamber, d	արդեշտ	iic'	
	N/A							
4.	(Date lits) transacted business in Florida, it prior to registration (See sections 605 0903 & 605 0905, E.S. to determine penalty lianting)							
5	3740 Davinci Ct			3749 Daviner Ct		2.	r.a	
	Street Address of	runcipai Office)	б.	(Mail	ine Abaress)		د.» ۲_ب	
	Suite 100			Suite 100			2	بين مدي پيرو، مدي
		······································				.:		 -
	Peachtree Corners, GA	30042		Peachtree Corners, G	a 30092		>	
	······			·······			<u>O</u>	رين.
7,	Name and street address	s of Florida registered agent: (P.O. Box	<u>NOT</u> a	(cceptable)		.:	ليبا ل.	
	Name:	Registered Agents Legal Services, LLG						
	Office Address:	155 Office Plaza Drive, Suite A						
		Tallahassee		, Florida	32301			
		(Caty)			Zip coce)			

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 lesignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree v comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with nd accept the obligations of my position as registered agent.

. ____ (Registered agent) computate

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:
Manager	Name:	Manager	Name: Pam Conlon
Member	Address: 3740 Davinci Ct	🗌 Member	Address:
Authorized	Suite 100	Authorized	Suite 100
Person	Peachtree Corners, GA 30092	Person	Peachtree Corners, GA 30092
Other	Other	Other	Other
		,	
Manager	Name:	🗋 Manager	Name:
Member	Address:	Member	Address:
Authorized		Authorized	
Person		Person	
Other	Other	Other	
Manager	Name:	Manager	Name: <u> </u>
Member	Address:	Member	Address:
Authorized		Authorized	
Person		Person	
]Other	Other	Other	Other

<u>iportant Notice</u>: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonlexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the isdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath he translator must be submitted)

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any false information mitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

amela Conton

Signature of an authorized person

Pam Conlon

Typed or printed name of signee

Control Number : 19008014

STATE OF GEORGIA

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

CERTIFICATE OF EXISTENCE

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

Level-Up Towers, LLC

a Domestic Limited Liability 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 Annotated 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.

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Docket Number: 16976987Date Inc/Auth/Filed:01/17/2019Jurisdiction: GeorgiaPrint Date: 03/26/2019Form Number: 211

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Brad Rafforsperger

Brad Raffensperger Secretary of State