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## **CT CORP**

## 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

D	ate:	4/25/2019	M
		Acc#I20160000072	a: DW
Name:	WINCRES	T INVESTMENTS, LLC	
Document #:			
Order #:	11634557		
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Thank you!

### COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:	Windcrest Invetsmen	nts, LLC		
300000011	· · · · · · · · · · · · · · · · · · ·	Name of Lim	ited Liability Company	
				act Business in Florida," Certificate of ompany to transact business in Florida.
Please return	all correspondence co	oncerning this matter to the following	owing:	
	Adriana Tatum			
		Name	of Person	
	Coleman Talley	LLP		
		Firm/	Company	
	109 South Ashle	ey Street		
		A	ldress	
	Valdosta, G <del>e</del> org	ia 31601		
		City/State	and Zip Code	
	adriana.tatum@co	lemantalley.com		
		E-mail address: (to be used for	future annual report notific	cation)
For further in:	formation concerning	this matter, please call:		
Adri	iana Tatum	at	229 671-8227	
	Name of	Contact Person	Area Code Daytin	ne Telephone Number
Divis	ILING ADDRESS: sion of Corporations			Corporations
	stration Section Box 6327		Registration Clifton Build	
Talla	ihassee, FL 32314		2661 Execut Tallahassee,	tive Center Circle FL 32301
	osed is a check for the se make check payabl	e following amount: e to: FLORIDA DEPARTME	NT 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

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

IN COMPILANCE 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:

(Name of Foreign I	Limited Liability Company; must include "Limi	ted Liability Compar	iy," "L.L.C.," or "LLC.")		<del></del>
Windcrest Investments (G	eorgia), LLC				
If name unavailable, enter alternate na	corgia), LLC ume adopted for the purpose of transacting business in F	lorida. The alternate nar	ne must include "Limited Liabilit	by Company," "L.l. C," or "	'LLC.")
Georgia 2.		3.	(FEI number,		
(Jurisdiction under the law of wh	nch foreign limited liability company is organized)		(FEI number,	if applicable)	
4					
	(Date first transacted business in Florida, if prior (See sections 605 0904 & 605,0905, F.S. to deter	o registration.) mine penalty liability)			
133 Nottingham Drive 5.		133 No 6.	ottingham Drive (Mailing Address		
(Street Address of P	rineipal Office)		(Mailing Address	3)	
Thomasville, GA, 3179	22	Thoma	sville, GA 31792		
		<del></del>		2019 APR	+12.7
<u> </u>				2 R	
7. Name and street addres	s of Florida registered agent: (P.O. Bo	x NOT acceptal	ole)	<u> </u>	į.
				SEE SEE	3 [
Name:	CT Corporation System			AM II: 23	<b>,</b>
Office Address:	1200 South Pine Island Road			1	
Office Address.	Plantation		33324		
	(City)		, Florida(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.

Jin Song, Assistant Secretary

(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: John H. Bennett Manager Manager Name: Address: 133 Nottingham Drive Member Member Address: Thomasville, GA, 31792 ☐ Authorized Authorized Person Person Other\_ Other\_\_\_\_ Other\_ Other Manager Name: \_\_\_\_\_ Manager Name: Member Address: Member Address: Authorized Authorized Person Person Other\_ Other Other\_\_\_ Manager Manager Name: 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 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

John H. Bennett

Control Number: 14121285

## 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

Windcrest Investments, 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.

Docket Number : 17166907 Date Inc/Auth/Filed: 12/29/2014 Jurisdiction : Georgia Print Date : 04/24/2019

Form Number : 211



Brad Raffensperger

Brad Raffensperger Secretary of State