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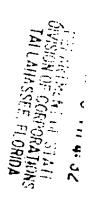
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LIVE WATER SOUTHERN, LLC

TYPE OF FILING: APPLICATION

COST: 125.00

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COVER LETTER

	Division of Corporation	s					
SUBJEC"	Live Water Southern	, LLC			<u> </u>		
SUBJEC	··	Name of Lin	nited Liability	Company			
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Please rett	um all correspondence co	oncerning this matter to the fol-	lowing:				
	Macye Maher						
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	macye@livewater	properties.com					
		E-mail address: (to be used fo	r future annua	report notifical	tion)	_	
For further	r information concerning	this matter, please call:					
F	funter Brant	n'	904 t (813-4508)			
_	Name of	Contact Person	Area Code	Daytime	Telephone Number		
D R P.	MAILING ADDRESS: Vivision of Corporations egistration Section O. Box 6327 allahassee, FL 32314			STREET AD Division of Co Registration S Clifton Buildin 2661 Executiv Tallahassee, F	orporations ection ng e Center Circle		
	nclosed is a check for the	e following amount: to: FLORIDA DEPARTME	ENT OF STA	re			
	\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00	Filing Fcc & ed Copy	S160.00 Filing		

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: Live Water Southern, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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.") South Carolina (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) No business transacted yet in Florida (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 2 Office Park Court #103 2 Office Park Court #103 (Mulling Address) (Street Address of Principal Office) Columbia, SC 29223 Columbia, SC 29223 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Paracorp Incorporated Name: 155 Office Plaza Dr. 1st Floor Office Address: Tallahassec

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.

(City)

, Florida

Jody Moua AKS + 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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name: _ Macye Maher Richard A. Maher Manager Name: Manager PO Box 9240 PO Box 9240 Address: Member Member Address: Jackson WY 83002 Jackson WY 83002 Authorized Authorized Person Person Other___ Other_ Other__ Other Hunter Brant Manager Manager Name: Manager Name: 12412 San Jose Blvd Suite 303 ■ Member Address: Jacksonville, FL 32223 Authorized Authorized Person Person []Other _____Other_____ Other_ Other___ Manager Name: Name: ______ Manager ☐ Member Address: _ Member 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. Richard A. Maher

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

Live Water Southern, LLC, a limited liability company duly organized under the laws of the State of South Carolina on March 26th, 2019, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 3rd day of May, 2019.

Mark Hammond, Secretary of State