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### COVER LETTER

Registration Section Division of Corporations

OF,

SUBJECT: Way FZ To Build LLC Name of Limited Liability C	Company		
The enclosed "Application by Foreign Limited Liability Company for Authoriza Existence, and check are submitted to register the above referenced foreign limit	tion to Transact Business in Florida," and liability company to transact busin	' Certificate of ness in Florida.	
Please return all correspondence concerning this matter to the following:			
Wayne G Edwards Name of Person			
Way EZ To Build / LC Firm/Company		-	
1744 Nathan Ln Address		-	
Austell GA 30168 City/State and Zip Code		-	
wayedwards @ yahoo.com E-mail address: (to be used for future annua	<b>-</b> -••	19 JUN	
For further information concerning this matter, please call:	6 1 2 2 2 1 2 2 2 1 1 1 1 1 1 1 1 1 1 1	71. L. P. 1. 1. 2. 1. 1. 1. 2. 1. 1. 1. 2. 1. 1. 1. 2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
Name of Contact Person Area Code	Daytime Telephone Number	<del>-</del> <del>-</del> <del>-</del> -	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	ion	
_ , , , , ,	TTE  O Filing Fee & · □ \$160.00 Filing  Tied Copy of Status & Ce		te

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

I. Way [- (Name of Pareign	Z To Build Labridge "Lar	nted Liability Company," "L L.C.,"	or "LLC.")		
If name unavailable, enter alternate na	ame adopted for the purpose of transacting business in	Florida. The alternate name must include:	Lumited Liability Com	pany,""L.L.C," or	"LLC ")
Centain		3. <u>83-3868</u>	8627.		
(Jurisdiction under the law of wh	nch foreign limited liability company is organized)	3. <u>83 500</u>	(FEI number, it appl	ticable)	
.1					
••	(Date first transacted business in Florida, it pric (See sections 605 0904 & 605 0905, F.S. to det	r to registration ) ernine penalty liability)			
5. <u>1744 Nathe</u> (Street Address of P	en Lane	6. 3360 Ho	inn ah Mading Address)	ct	
Austell G1	1 30168	Ponder	Springs	·	
		<u> GA 3</u>	30127	19.	<del></del>
7. Name and street addres	ss of Florida registered agent: (P.O. I	Box <u>NOT</u> acceptable)		UN 12	2 11
Name:	Wayne & Edwa	erds		PH 4:25 PH 4:25 PH 4:25	•
Office Address:	1007 Bay AV			.9*	
	Parana City	, Florida	32401 (Zip code)		
designated in this applica to comply with the provise	otance: egistered agent and to accept service tion, I hereby accept the appointme ions of all statutes relative to the pro s of my position as registered agent.	n as registered agent and agi	ree to act in this	capacity. If	further agr
	Mayer & Edle	vond.			

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: Name: Altorise Wilcox Name: \_\_\_\_ Manager Manager Address: 1744 Nathan Ln Member 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\_\_\_\_ Name: \_\_\_\_\_ Manager Manager Member | Member Address: Authorized Authorized Person Person 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 \$.817,155, F.S.

Control Number: 19030119

### 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

# WayEZ To Build 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 : 17378478 Date Inc/Auth/Filed: 03/05/2019 Jurisdiction : Georgia Print Date : 06/12/2019

Form Number : 211



Brad Raffangerger

Brad Raffensperger Secretary of State