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## COVER LETTER

TO:		stration Section sion of Corporations				
SUBJE	СТ.	Signature Title Services, LLC				
SOBJE	Company	_				
		"Application by Foreign Limited Liability of check are submitted to register the above				
Please re	eturn a	all correspondence concerning this matter t	o the following:			
		Jennifer Cook				
			Name of Person		_	
Signature Title Services, LLC						
Firm/Company						
1517 Hunt Club Blvd Suite 200						
			Address		-	
	Gallatin, TN 37066					
		C	City/State and Zip Code	······································	_	
		jenne@reliantrealty.com				
		E-mail address: (to be	e used for future annua	report notification)	-	
For furth	ner inf	formation concerning this matter, please cal	II:			
	Jenn	ifer Cook	615 at (	289-1654	2019 JUL 31	
		Name of Contact Person	Area Code	Daytime Telephone Number	JIJ	'= <del>[</del> ]
	Divis Regis P.O.	LING ADDRESS: ion of Corporations stration Section Box 6327 hassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	.31 PH 4:21	
	Plcas	esed is a check for the following amount: e make check payable to: FLORIDA DEP 125.00 Filing Fee S130.00 Filing Fee Certificate of	Fee & 🔲 \$155.00	Filing Fee & \$160.00 Filing cd Copy of Status & Cer		

# 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:

(II name unavailable, enter alternate name	adopted for the purpose of transacting business in				
TN		n Florida. The alterna	te name must include "Limited Liab	oility Company," "L.L.C,"	or "[,1.C.")
2.		3.			
(Jurisdiction under the law of which	foreign limited liability company is organized)	reign limited liability company is organized)  3. (FEI number, if applicable)			
08/01/19					
1	(Date first transacted business in Florida, if pric (See sections 605.0904 & 605.0905, F.S. to det	or to registration.) termine penalty liabi	ity)		
11973 Southern Blvd			17 Hunt Club Blvd Suite	200	
5, (Street Address of Princ	Principal Office)	0	6. (Mailing Addres		
Royal Palm Beach, FL 33	3411	Gallatin, TN 37065			
	<del> </del>	_		<u></u>	<del></del>
	of Florida registered agent: (P.O. E	Зох <u>NOT</u> acce	eptable)	IMPERIORS (	
l Office Address:	1973 Southern Blvd	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	e in
I _	Royal Palm Beach		33411 , Florida		. 2
	(City)		(Zìp code	c)	
designated in this applicatio to comply with the provision	nce: stered agent and to accept service in, I hereby accept the appointmen is of all statutes relative to the pro- f my position as registered agent.	nt as registered	d agent and agree to act	in this capacity.	I further agr
	Melio (Registered age	ra Qu	rio-	<del></del>	

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: Name and Address: Title or Capacity: Title or Capacity: Casey Brown Manager Manager Manager 1517 Hunt Club Blvd Member Address: ☐ Member Address: \_\_\_\_\_\_ Suite 200 Authorized Authorized Gallatin, TN 37066 Person Person Other\_\_\_ Other\_ Other\_\_\_\_ Other\_ Jennifer Cook Name: Name: \_\_\_\_\_ Manager Manager Manager 1517 Hunt Club Blvd Address: \_\_\_\_ Member Member Suite 200 Authorized Authorized Gallatin, TN 37066 Person Person Other \_\_\_\_\_ Other Other | Other\_ Manager Name: \_\_\_\_\_ Name: Manager 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 Casey Brown

Typed or printed name of signee



## **Division of Business Services Department of State**

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

# Secretary of State

JENNIFER PIERCE COOK

JENNIFER PIERCE COOK **SUITE 200** 

1517 HUNT CLUB BLVD GALLATIN, TN 37066

Request Type: Certificate of Existence/Authorization

Request #: 0322722

Document Receipt

Receipt #: 004917575

Payment-Credit Card - State Payment Center - CC #: 3761851074

Regarding:

SIGNATURE TITLE SERVICES, LLC

Filing Type:

Limited Liability Company - Domestic Formation/Qualification Date: 10/09/2007

Status:

Active Perpetuai

Duration Term:

Business County: SUMNER COUNTY

July 12, 2019

Issuance Date: 07/12/2019

Copies Requested:

Filing Fee:

\$20.00

\$20.00

Control # : Date Formed: 560645

Formation Locale: TENNESSEE

10/09/2007

Inactive Date:

#### CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

## SIGNATURE TITLE SERVICES, LLC

- \* is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- \* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- \* has filed the most recent annual report required with this office;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

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