M19000008073

| (Requestor's Name) | | | | |
|---|--|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP WAIT MAIL | | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: Taylan gave permission to correct RA name | | | | |
| | | | | |

Office Use Only



100332889021

08/16/19--01030--013 **160.00

2019 AUG 16 PM 4: 29

B KINSET 1218

COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: SAYDAR PROPERTIES, LLC |
| 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: |
| TAYLAN SAYBAR Name of Person |
| Name of Person |
| 7-80180 Q11 60 8011 |
| SAYDAR PROPERTIES LLC Firm/Company |
| rum/Company |
| 915 CHITTO CT |
| 915 GUNTER CT. Address |
| Address . |
| ALPHARETTA, GA. 30022_ City/State and Zip Code |
| City/State and Zip Code |
| SAYDAR PROPERTIES & GMAIL. COM E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| TAYLAN SAYDAR al (404) 309-4850 Name of Contact Person Area Code Daytime Telephone Number |
| Name of Contact Person Area Code Daytime Telephone Number |
| MAILING ADDRESS: STREET ADDRESS: |
| Division of Corporations Division of Corporations |
| Registration Section Registration Section |
| P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle |
| Tullahassee, FL 32301 |
| Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE |
| S125.00 Filing Fee \$\int S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status Certified Copy of Status & Certified Copy |
| |

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

| | TION 605.0902, FLORIDA STATUTES, THE F ASDESS INTHE STATE OF FLORIDA: | OLLOWING IS SURMITTED TO RECESTED | R A FOREIGN LIMITED LIABILITY |
|---|---|---|----------------------------------|
| | R PROPERTIES L | L.C. d Uability Company, "LLC.," or "LLC.") | |
| KATAMIL (If some unavealable, caser alternate o | A L.L.C. | ords. The alternate name must include "Limmed Liabili- | ey Company," "L.L.C," or "LL.C." |
| 2. GEORGIA | lich foreign limited liability company is organized) | 3. <u>83-37449</u> (Fill member) | 79 (fapplicable) |
| 4 | (Date Brit transacted brasices in Florida, if prior to (See sections 603,0904 & 603,0905, F.S. to deserte | registration) one penalty (subduty) | — - |
| 5. 915 GUU7 | FR CT. | 6. 915 GUNTEI | CT. |
| ALPHALETT | A, GA. 30022 | ALPHARETTA. | 6A. 30022 |
| 7. Name and street addres | a of Florida registered agent: (P.O. Box | NOT acceptable) | 201 |
| Name: | SUNSHINE CORPORA | TE FILINGS LLC | ### # 2019 AUG |
| Office Address: | 7901 4th St. N. | Suite 300 | . 5 |
| | St. Petersburg | , Florida 3370 (Zip code) | : ∾ |
| designated in this applicat to comply with the provisi | tance: existered agent and to accept zervice of pion, I hereby accept the appointment as one of all statutes relative to the proper of my position as registered agent. Referend agent (Referend agent) | s registered agent and agree to act in and complete performance of my du | this capacity. I further agree |
| | (Registred egent's | mpater) | |

| 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: TAYLAN SAYDAL | ■ Manager | Name: MCHELLE SAYDAR | | | |
| Member | Address: 915 GUNTER CT. | ☐ Member | Address: 915 GUNTER CT. | | | |
| Authorized | ALPHARE ITA GA | Authorized | ALPHARETTA GA | | | |
| Person | 30027 | Person | 30022 | | | |
| Other | Other | Other | Other | | | |
| Manager | Name: | Manager Manager | Name: | | | |
| Member | Address: | ☐ Member | Address: | | | |
| Authorized | | ☐ Authorized | | | | |
| Person | | Person | | | | |
| Other | Other | | Other | | | |
| Manager | Name: | ☐ Manager | Name:6 | | | |
| Member | Address: | Authorized | | | | |
| Authorized | | Person | 2 | | | |
| 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. Non-indexed 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. Therefore plant some of copies. | | | | | | |

Control Number: 19025897

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

Saydar Properties L.L.C. 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 Annuated 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 : 17486529 Date Ine/Auth/Filed: 02/25/2019 Jurisdiction : Georgia Print Date : 08/13/2019

Form Number : 211



Brad Rafforepage

Brad Raffensperger Secretary of State