

MI90000090

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

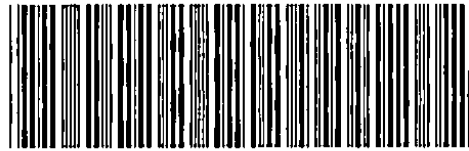
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SEP 20 2019

SEP 19 PM 4:47
HILL COUNTY CLERK STATE
HILL COUNTY, TEXAS

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 892723 8117606
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 125.00

2019 SEP 19 PM 4:47
TALLAHASSEE, FLORIDA
STATE

ORDER DATE : August 21, 2019
ORDER TIME : 11:16 AM
ORDER NO. : 892723-015
CUSTOMER NO: 8117606

FOREIGN FILINGS

NAME: CUMBERLAND CONSULTING GROUP,
LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cumberland Consulting Group, 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.

Please return all correspondence concerning this matter to the following:

Ashton Sanders
Name of Person

Cumberland Consulting Group, LLC
Firm/Company

720 Cool Springs Blvd, Suite 550
Address

Franklin, TN 37067
City/State and Zip Code

tax@cumberlandcg.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ashton Sanders at (415) 373-4470 xt. 111
Name of Contact Person Area Code Daytime Telephone Number

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

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy | <input type="checkbox"/> \$160.00 Filing Fee, Certificate
of Status & Certified Copy |
|--|---|--|---|

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSAC
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LI
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Cumberland Consulting Group, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "L.L.C.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC,"

2. Delaware 3. 20-0236056
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 6/15/2013
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 720 Cool Springs Blvd 6. 720 Cool Springs Blvd.
(Street Address of Principal Office) (Mailing Address)
Suite 550
Franklin, TN 37067

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (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 designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I fu to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am famu and accept the obligations of my position as registered agent.

By: Roxanne Turner Roxanne Turner
Corporation Service Company Asst. Vice President
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
<u>CEO</u>	<u>Brian Cahill</u> <u>15 Spruce Ave</u> <u>Marblehead, MA 01945</u>		
<u>CEO</u>	<u>Barry Meyer</u> <u>770 Sandpiper Heights Dr.</u> <u>Sandy Springs, GA 30350</u>		

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate und 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 informati submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Barry Meyer
signature of an authorized person
Barry Meyer, CEO
Typed or printed name of signer

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CUMBERLAND CONSULTING GROUP, LLC" DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF SEPTEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CUMBERLAND CONSULTING GROUP, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF DECEMBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

2019 SEP 19 04:47
SECRETARY OF STATE
JWB




Jeffrey W. Bullock, Secretary of State

5064555 8300

SR# 20197115538

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 2031

Date: 09