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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Copies Certificates of Status	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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D. BRUCE OCT 22 2019

COVER LETTER

TO:	Registration Section Division of Corporations		
11151	Nickey Gregory Company LLC		
ODJ	Name of Limited Liability Company		
The ci Existe	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," nee, and check are submitted to register the above referenced foreign limited liability company to transact busin	Certifi ess in l	cate o Florida
lease	return all correspondence concerning this matter to the following:		
	Kim Monti		
	Name of Person		
	Transport Management Group Inc		
	Firm/Company		
	521 Forest Parkway, Suite 200		
	Address		
	Forest Park, GA 30297		
	City/State and Zip Code		
	kmonti@tmg-ga.com		
	E-mail address: (to be used for future annual report notification)		
For fu	ther information concerning this matter, please call:	2014 CC	*****
	Kim Monti 404 366-2002 at ()	1	4
	Name of Contact Person Area Code Daytime Telephone Number	12	•
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	7.2	
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE \$\Begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		

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

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

	name adopted for the purpose of transacting business in Fl	orida. The alt	ernate name must include "Limited Liabilit	y Company," "L.I	u.C." or "Li
GA		3	20-1668222		
(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)			
	10/1/19				
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration. nine penalty I) ability)		
16 FOREST PARKWAY			16 FOREST PARKWAY		
(Street Address of	Principal Office)	6.	(Mailing Address)	
BLDG N			BLDG N		
FOREST PARK, GA	30297		FOREST PARK, GA 30297		
Name and street address	ss of Florida registered agent: (P.O. Bo	x <u>NOT</u> a	eceptable)		26
Name:	HARMON N GREGORY			- : :	<i>ज</i>
Office Address:	2786 COUNTY ROAD 136			٠.	
	WHITE SPRINGS		32096	,,	

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.

(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]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Name: HARMON N GREGORY Name: ■ Manager Address: ____ Member Address: Member BLDG N Authorized Authorized FOREST PARK, GA 30297 Person Person Other_ Other_____ Other_ Other Manager Name: _____ ☐ Member Address: _____ ☐Member Address: Authorized Authorized Person Person Other Other_____ Other____ Name: ☐ Manager Manager Name: ___ Member ☐ Member Address: 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.

Typed or printed name of signee

HARMON N GREGORY

Control Number: 0457086

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

NICKEY GREGORY COMPANY, 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 of 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 : 18130652
Date Inc/Auth/Filed: 09/26/2004
Jurisdiction : Georgia
Print Date : 10/01/2019

Form Number : 211



Brad Rafforsperger

Brad Raffensperger Secretary of State