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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

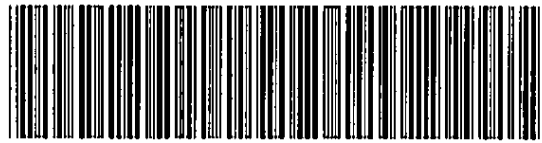
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Twenty Ninety Five, 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:

Abbey E. Mateer

Name of Person

Gregory, Doyle, Calhoun & Rogers, LLC

Firm/Company

49 Atlanta Street

Address

Marietta, Georgia 30060

City/State and Zip Code

alex@bbhelectric.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alex Owen

770

874-1162

Name of Contact Person

at (_____) 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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$160.00 Filing Fee, Certificate of Status & Certified Copy

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FBI

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:

1. Twenty Ninety Five, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

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

2. Georgia 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)

4. N/A
(Date first transacted business in Florida, if prior to registration, (See sections 605.0904 & 605.0905, F.S. to determine perjury liability)

5. 3660 Tam Court 6. 3660 Tam Court
(Street Address of Principal Office) (Mailing Address)
Marietta, Georgia 30062 Marietta, Georgia 30062

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

Name: CT Corporation System
Office Address: 1200 South Pine Island Road
Plantation, Florida 33324
(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 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.

[Signature]
(Registered agent's signature) Rose Song, Assistant Secretary

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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: Manager Name: Alex Owen ✓
Name and Address:
 Member Address: 3660 Tarn Court
 Authorized Marietta, Georgia 30062
 Person _____
 Other _____ Other _____

Manager Name: Blake Hungerford ✓
Name and Address:
 Member Address: Gregory, Doyle, Calhoun & Ro
 Authorized 49 Atlanta Street
 Person Marietta, Georgia 30060
 Other Attorney-in-fact _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

Title or Capacity: Manager Name: _____
Name and Address:
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

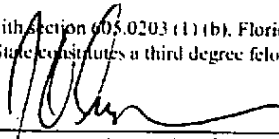
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Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.



 Signature of an authorized person
 Alex Owen, Manager

 Typed or printed name of signer

STATE OF GEORGIA

Secretary of State
Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

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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

Twenty Ninety Five 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 : 181-43866
Date Inc/Auth/Filed: 04/28/2016 ✓
Jurisdiction : Georgia
Print Date : 10/15/2019
Form Number : 211



Brad Raffensperger

Brad Raffensperger
Secretary of State



770.422.1775 PHONE
770.426.6155 FAX
49 ATLANTA STREET
MARIETTA, GEORGIA 30060
WWW.GREGORYDOYLEFIRM.COM

Abbey E. Mateer, Esq.
Email: amateer@gregorydoylefirm.com

October 22, 2019

2019 OCT 23 AM 9:03

UNIT 319

Via FedEx Overnight Mail

Florida Department of State
Divisions of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

Re: *Twenty Ninety Five LLC – Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida*

Dear Clerk:

Enclosed for filing please find the Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, Certificate of Existence, and our firm check in the amount of \$125.00 for the filing fee. I would appreciate if you would forward the filed Certificate to me by email at amateer@gregorydoylefirm.com or by mail at 49 Atlanta Street, Marietta, GA 30064, as soon as possible.

We appreciate your assistance with this matter. If you have any questions, please do not hesitate to contact me.

Sincerely,

GREGORY, DOYLE, CALHOUN & ROGERS, LLC

Abbey E. Mateer
For the Firm

AEM/cyb
Enclosures