

# 1900000035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

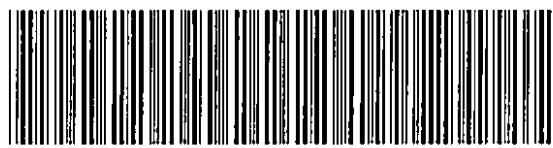
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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2019 NOV - 1 PM 4:39

FLORIDA  
TALLAHASSEE, FLORIDA



COGENCYGLOBAL

415 N CALHOUN ST., STE 4  
TALLAHASSEE, FL 32301  
P: 866.625.0838  
F: 866.625.0839  
COGENCYGLOBAL.COM

Account#: I20000000088

Date: 11/01/2019

Name: Merritt Walker

Reference #: 1143728

Entity Name: ECM-BG2-TAMARAC, FL-1-UT, LLC

TALLAHASSEE, FLORIDA

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Articles of Incorporation/Authorization to Transact Business

Amendment

Change of Agent

Reinstatement

Conversion

Merger

Dissolution/Withdrawal

Fictitious Name

Other \_\_\_\_\_

Authorized Amount: \$125

Signature: .....

• CORPORATE HQ  
COGENCY GLOBAL, INC  
10 E 40<sup>TH</sup> ST, 10<sup>TH</sup> FL  
NY, NY 10016  
D: +1.212.947.7200  
P: 800.221.0102  
F: 800.944.6607

• EUROPEAN HQ  
COGENCY GLOBAL (UK) LIMITED  
REGISTERED IN ENGLAND & WALES  
REGISTRY #801072  
61 LOYDS AVE, UNIT 4CL  
LONDON EC3N 3AX  
•44 (0)20.3961.3080

• ASIA PACIFIC HQ  
COGENCY GLOBAL (HK) LIMITED  
A HONG KONG LIMITED COMPANY  
UNIT B, 1/F, LIPPO LEIGHTON TOWER  
103 LEIGHTON RD, CAUSEWAY BAY  
HONG KONG  
P: +852.2682.9633

**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. ECM-BG2-Tamarac, FL-1-UT, LLC**

(Name of Foreign Limited Liability Company: must include "Limited Liability Company," "L.L.C.," or "LLC.")

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

**2. Utah**

(Jurisdiction under the law of which foreign limited liability company is organized)

**3. \_\_\_\_\_**  
(FEI number, if applicable)

**4. \_\_\_\_\_**  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

**5. 4747 Williams Dr**

(Street Address of Principal Office)

**6. 4747 Williams Dr**

(Mailing Address)

**Georgetown, TX 78633**

**Georgetown, TX 78633**

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

Name:

**COGENCY GLOBAL INC.**

Office Address:

**115 North Calhoun St, Suite 4**

**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 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.*

**Colleen Hernes**

(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]:

<b><u>Title or Capacity:</u></b>		<b><u>Name and Address:</u></b>
<input checked="" type="checkbox"/> Manager	Name:	Rocky Hardin
<input type="checkbox"/> Member	Address:	4747 Williams Drive
<input type="checkbox"/> Authorized	Georgetown, TX 78633	
Person	<hr/>	
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	

<u>Title or Capacity:</u>		<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name:	TALLAHASSEE, FLORIDA 32301
<input type="checkbox"/> Member	Address:	1111 11th Street
<input type="checkbox"/> Authorized		P.O. Box 1111
Person		1111 11th Street
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	39

<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____
Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

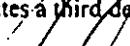
<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____
Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____
Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> 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.

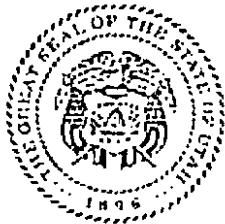
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must 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.

on 605.0203 (1) (b), Florida Statute  
constitutes a third degree felony as prov  
  
Signature of an authorized person

Rocky Hardin

Typed or printed name of source



Utah Department of Commerce  
Division of Corporations & Commercial Code  
160 East 300 South, 2nd Floor, PO Box 146705  
Salt Lake City, UT 84114-6705  
Service Center: (801) 530-4849  
Toll Free: (877) 526-3994 Utah Residents  
Fax: (801) 530-6438  
Web Site: <http://www.commerce.utah.gov>

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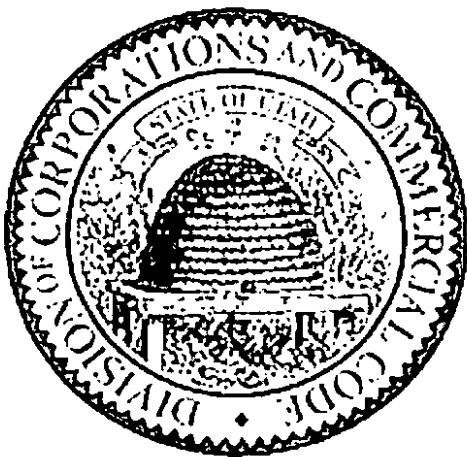
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TAMARAC, FLORIDA

## CERTIFICATE OF EXISTENCE

Registration Number: 11463544-0160  
Business Name: ECM-BG2-TAMARAC, FL-1-UT, LLC  
Registered Date: September 16, 2019  
Entity Type: LLC - Domestic  
Status: Current

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



Jason Sterzer  
Director  
Division of Corporations and Commercial Code



EMBREE

ASSET GROUP, INC.

To whom it may concern,

These below listed entities are an entity qualified to do business in the state of Florida on 9/16/2019 and voluntarily withdrawn 11/4/2019, will not revoke the dissolution. The listed entities below, of Florida also gives up their right to this name.

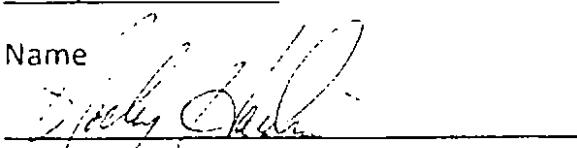
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AT TALLAHASSEE, FLORIDA

ECM-BG2-Deerfield Beach, FL-1-UT, LLC  
ECM-BG2-Ft Lauderdale, FL-1-UT, LLC  
ECM-BG2-Ft Lauderdale, FL-2-UT, LLC  
ECM-BG2-Gainesville, FL-1-UT, LLC  
ECM-BG2-Gainesville, FL-2-UT, LLC  
ECM-BG2-Gainesville, FL-3-UT, LLC  
ECM-BG2-Hawthorne, FL-1-UT, LLC  
ECM-BG2-Hollywood, FL-1-UT, LLC  
ECM-BG2-Hollywood, FL-2-UT, LLC  
ECM-BG2-Jacksonville, FL-1-UT, LLC  
ECM-BG2-Jacksonville, FL-2-UT, LLC  
ECM-BG2-Jacksonville, FL-3-UT, LLC  
ECM-BG2-Jacksonville, FL-4-UT, LLC  
ECM-BG2-Jacksonville, FL-5-UT, LLC  
ECM-BG2-Jacksonville, FL-6-UT, LLC  
ECM-BG2-Jacksonville, FL-7-UT, LLC  
ECM-BG2-Lake City, FL-1-UT, LLC  
ECM-BG2-Lantana, FL-1-UT, LLC  
ECM-BG2-Lauderhill, FL-1-UT, LLC  
ECM-BG2-Orange Park, FL-1-UT, LLC  
ECM-BG2-Ormond Beach, FL-1-UT, LLC  
ECM-BG2-Palm Coast, FL-1-UT, LLC  
ECM-BG2-Plantation, FL-1-UT, LLC  
ECM-BG2-Riviera Beach, FL-1-UT, LLC  
ECM-BG2-St Augustine, FL-1-UT, LLC  
ECM-BG2-Tamarac, FL-1-UT, LLC  
ECM-BG2-West Palm Beach, FL-1-UT, LLC  
ECM-BG2-West Palm Beach, FL-2-UT, LLC  
ECM-BG2-West Palm Beach, FL-3-UT, LLC  
ECM-BG2-Yulee, FL-1-UT, LLC

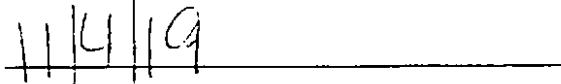
This resolution is approved by:

Rocky Hardin

Name



Signature



Date

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TALLAHASSEE, FLORIDA