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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

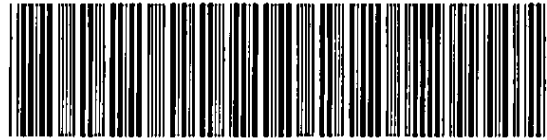
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/14/20--01099--009 **155.00

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2020 FEB 14 PM 3:10

FILED

FEB 25 2020
T. LEMUEUX

Alliance Surveying LLC
Attn: David Anderson
6095 Atlanta Hwy
Flowery Branch, GA. 30542
02/11/2020

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL. 32314

To Whom it may Concern:

Alliance Surveying LLC, is seeking registration as a foreign limited liability company to transact business in Florida. If there are any issues or concerns with our application please let me know. My contact info is: davida@aepatl.com or 334.360.4197

Sincerely,

David Anderson

Manager

A handwritten signature in black ink, appearing to read 'David Anderson', written over the printed name.

**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. Alliance Surveying LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," 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," "L.L.C." or "LLC.")

2. Georgia 3. 84-3591553
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI 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 penalty liability)

5. 6095 Atlanta Highway 6. 6095 Atlanta Highway
(Street Address of Principal Office) (Mailing Address)
Suite 100 Suite 100
Flowery Branch, GA. 3054 Flowery Branch, GA. 30542

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

Name: David Anderson

Office Address: 261 Abby Dr.

Wewahatchka 32465
(City) Florida (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.

David L. Anderson
(Registered agent's signature)

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2021 FEB 14 PM 3:10
TALLAHASSEE, FL

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:**

☐ Manager Name: David L. Anderson

☒ Member Address: 6095 Atlanta Hwy, Suite 100

☐ Authorized Flowery Branch, GA. 30542

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☐ Manager Name: James D. Jacobi

☒ Member Address: 299 S. Main Street, Suite A

☐ Authorized Alpharetta, GA. 30009

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

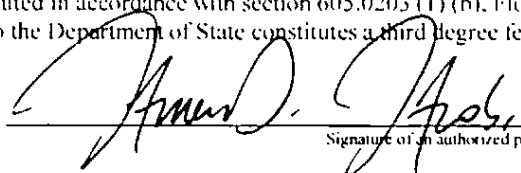
Person _____

☐ 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.



Signature of an authorized person

James D. Jacobi

Typed or printed name of signee

STATE OF GEORGIA

Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CERTIFICATE OF ORGANIZATION

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

Alliance Surveying, LLC
a Domestic Limited Liability Company

has been duly organized under the laws of the State of Georgia on **10/17/2019** by the filing of articles of organization in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta
and the State of Georgia on **10/21/2019**.



Brad Raffensperger

Brad Raffensperger
Secretary of State

ARTICLES OF ORGANIZATION

Electronically Filed

Secretary of State

Filing Date: 10/17/2019 4:00:01 PM

BUSINESS INFORMATION

CONTROL NUMBER	19137454
BUSINESS NAME	Alliance Surveying, LLC
BUSINESS TYPE	Domestic Limited Liability Company
EFFECTIVE DATE	10/17/2019

PRINCIPAL OFFICE ADDRESS

ADDRESS	299 South Main Street, Alpharetta, GA, 30009, USA
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REGISTERED AGENT

NAME	ADDRESS	COUNTY
James D. Jacobi	299 South Main Street, Alpharetta, GA, 30009, USA	Fulton

ORGANIZER(S)

NAME	TITLE	ADDRESS
Richard S. Abram	ORGANIZER	1200 Ashwood Parkway, Suite 560, Atlanta, GA, 30338, USA

OPTIONAL PROVISIONS

N/A

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE	Richard S. Abram
AUTHORIZER TITLE	Organizer

STATE OF GEORGIA

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

Annual Registration

Electronically Filed

Secretary of State

Filing Date: 01/14/2020 14:21:09

BUSINESS INFORMATION

BUSINESS NAME : Alliance Surveying, LLC
CONTROL NUMBER : 19137454
BUSINESS TYPE : Domestic Limited Liability Company
ANNUAL REGISTRATION PERIOD : 2020

BUSINESS INFORMATION CURRENTLY ON FILE

PRINCIPAL OFFICE ADDRESS : 299 South Main Street, Alpharetta, GA, 30009, USA
REGISTERED AGENT NAME : James D. Jacobi
REGISTERED OFFICE ADDRESS : 299 South Main Street, Alpharetta, GA, 30009, USA
REGISTERED OFFICE COUNTY : Fulton

UPDATES TO ABOVE BUSINESS INFORMATION

PRINCIPAL OFFICE ADDRESS : 299 South Main Street, Ste A, Alpharetta, GA, 30009, USA
REGISTERED AGENT NAME : James D. Jacobi
REGISTERED OFFICE ADDRESS : 299 South Main Street, Alpharetta, GA, 30009, USA
REGISTERED OFFICE COUNTY : Fulton

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE : Tim Stubbs
AUTHORIZER TITLE : Authorized Person