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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Fax Number : (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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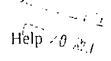
Foreign Limited Liability Company Safe Harbor Development, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00



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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: L Safe Harbor Development, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") Safe Harbor Development FL, 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.") Tennessee (Date first transacted business in Florida, it prior to registration.) (See sections 605,0004 & 605,0005, F.S. to determine penalty liability.) 308 Letterman Rd 308 Letterman Rd (Street Address of Principal Office) Knoxville TN 37919 Knoxville TN 37919 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Northwest Registered Agent LLC Name: 7901 4th St N STE 300 Office Address: St. Petersburg 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 heraby accept the appointment of the application of the application of the appointment of the application. 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

Name: Darby Campbell		Name and Addres
	Manager	Name:
Address: 308 Letterman Rd	Member	Address:
Knoxville TN 37919	Authorized	
	Person	
Other	Other	Other
Name:	☐ Manager	Name:
Address:	Member	Address:
	Authorized	
	Person	
Other	Other	Other
Name:	Manager	Name:
Address:	Member	Address:
	Authorized	
	Person	
Other		Other
	Other	Person Other

Lyped or printed name of signee



Division of Business Services Department of State

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

ANGELA OWENS

308 LETTERMAN ROAD KNOXVILLE, TN 37919

April 29, 2020

Request Type: Certificate of Existence/Authorization

Request #:

0362867

Issuance Date: 04/29/2020

Copies Requested:

Document Receipt

Receipt #: 005519318

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3780708804

\$20.00

Regarding:

Safe Harbor Development, LLC

Filing Type:

Limited Liability Company - Domestic

Formation/Qualification Date: 10/16/2014

Status:

Active

Duration Term:

Business County: KNOX COUNTY

Perpetual

Control #:

775081

Date Formed:

10/17/2014

Formation Locale: TENNESSEE

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Safe Harbor Development, LLC

- * is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

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