

M20000007975

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

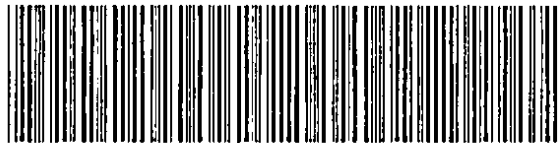
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2020 SEP 14 PM 2:10

CLERK OF SUPERIOR COURT
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

45
9/15/20

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I200000000195
REFERENCE : 418612 8319368
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 160.00

ORDER DATE : September 14, 2020
ORDER TIME : 12:31 PM
ORDER NO. : 418612-005
CUSTOMER NO: 8319368

2019 SEP 14 11:11:00

FOREIGN FILINGS

NAME: THRIFT MCLEMORE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER: _____

**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. Thrift McLemore, 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. 84-4099910
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. <u>1000 Parkwood Circle SE</u> (Street Address of Principal Office)	6. <u>1000 Parkwood Circle SE</u> (Mailing Address)
<u>Suite 900</u>	<u>Suite 900</u>
<u>Atlanta, Georgia 30339</u>	<u>Atlanta, Georgia 30339</u>

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

Name: Rachel Lee Dreher

Office Address: 501 East Las Olas Boulevard, Suite 200

Fort Lauderdale, Florida 33301
(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.


(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:**

☐ Manager Name: Jonathan A. Barash

☒ Member Address: 825 Highland Lane, #1202

☐ Authorized Atlanta, Georgia 30306

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Rachel Lee Dreher

☒ Member Address: 7884 Manor Forest Lane

☐ Authorized Boynton Beach, Florida 33436

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: McLemore Law, LLC

☒ Member Address: 449 Chelsea Cir NE

☐ Authorized Atlanta, Georgia 30307

Person _____

☐ Other _____ ☐ Other _____

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

☐ Manager Name: Robert Craig Thrift

☒ Member Address: 228 Mitchell Lane

☐ Authorized Woodstock, Georgia 30188

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Stephanie Nullman Eban

☒ Member Address: 1196 Roxboro Cove NE

☐ Authorized Atlanta, Georgia 30324

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

Jonathan A. Barash

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

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

Thrift McLemore, LLC

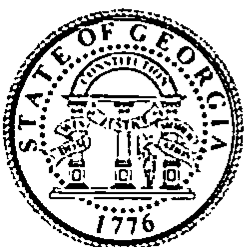
a Domestic Limited Liability Company

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 : 19582252
Date Inc/Auth/Filed: 01/01/2020
Jurisdiction : Georgia
Print Date : 09/03/2020
Form Number : 211



Brad Raffensperger

Brad Raffensperger
Secretary of State