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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
emailed Cent Permission to remove 10/7/20 soleowner for pavie; 5154 also more for Attalia; 5154 also more for Attalia; 5154				

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	17 ⁴	COVER LETTER	•			
	egistration Section ivision of Corporations	• • •				
	Elite Communities, LLC					
SUBJECT		ne of Limited Liability Company				
		y Company for Authorization to Transact Business in Flor e referenced foreign limited liability company to transact b				
Please retu	rn all correspondence concerning this matter	to the following:				
	David Luke					
		Name of Person				
	Elite Communities, LLC					
	• = • • • • • • • • • • • • • • • • • •	Firm/Company				
	581 Smith Cemetery Rd					
		Address				
	Winder, GA 30680					
		City/State and Zip Code				
	elitecommunitieslle@gmail.com					
	E-mail address: (to b	be used for future annual report notification)				
For further	information concerning this matter, please c	all:				
Alicia Purdy		678 963-5663	0.6797			
	Name of Contact Person	Area Code Daytime Telephone Number	er '			
	ailing Address:	Street Address:	:			
Registration Section		Registration Section				
Division of Corporations		Division of Corporations	တ			
P.O. Box 6327		The Centre of Tallahassee	დ. ⊦ე			
Į ;	allahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	<u></u>			
Ы	nclosed is a check for the following amount: ease make check payable to: FLORIDA DE \$125.00 Filing Fee \$\square\$\$ \$130.00 Filing F Certificate	ec & 🔲 \$155.00 Filing Fee & 🗏 \$160.00 Filing F	ee, Certificate Certified Copy			

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

L. Elite Communities, LL						
(Name of Foreign	Limited Liability Company; must include "Limite	d Liability	Company," "L.L.C.," or "LLC.")	 		
(If none may while area dispose	name adopted for the purpose of transacting business in F	مال وارسا	Steering and Steeling St. St. Co.			
	name adopted for the purpose of transacting business in F	torida ine	anemate name must include themice that may con	mpany, 1,1,0, or 1,100.		
State of Georgia 2.		3	84-3591062			
(Jurisdiction under the law of which foreign limited liability company is organized)		•••	(FEI number, if apple	(FEI number, if applicable)		
	d in Florida as date of application					
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	registration ine penalty	hability)			
8260 Wallace Wood R	d		581 Smith Cemetery Rd			
5. (Street Address of Principal Office)		6.	(Mailing Address)			
Gainesville, GA 30506			Winder, GA 30680			
				[658Z		
7. Name and street address	is of Florida registered agent: (P.O. Box	NOT a	acceptable))Ĉ.		
				1		
Name:	Jeanne Luke Longerbeam			7		
	-	-				
Office Address:	1683 Town Park Dr			8: 1:0		
	Port Orange		32129	Ō		
			, Florida			
	(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 dent'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:

David Luke

Manager

Name:

Manager

Name:

Thie or Capacity:	Name and Address:	Title of Capacity:		Name and Address:
□Manager	Name: David Luke	□Manager	Name:	
■Member	Address: 8260 Wallace Wood Rd	□Member	Address:	
Authorized	Gainesville, GA 30506	□Authorized		
Person		Person		· · · · · · · · · · · · · · · · · · ·
□Other	Other	Other	<u> </u>	□Other
∐ Manager	Name: Alicia Purdy	□Manager	Name:	
□Member	Address: 581 Smith Cemetery Rd	□Member	Address:	
Authorized	Winder, GA 30680	□Authorized		
Person		Person		
□Other	Other	□Other		□Other
□Manager	Name:	□Manager	Name:	27
□Member	Address:	□Member	Address:	· ·
□Authorized		□Authorized		44
Person		Person		
□Other	□Other	□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 theil Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of an authorized person

Alicia Purdy

Control Number: 19136940

STATE OF GEORGIA

Secretary of State

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

CERTIFICATE OF EXISTENCE

1. Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

ELITE COMMUNITIES, 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.

:<u>:</u>

Docket Number : 19646030 Date Inc/Auth/Filed: 10/14/2019 Jurisdiction : Georgia Print Date : 10/07/2020 Form Number : 211 @

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Brad Raffersperger

Brad Raffensperger Secretary of State