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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BARKER WILLIAMS, PLLC

Account Number : I20170000030

Phone : (850)308-7033

Fax Number : (850)308-7115

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

Email Address: ashley@ashleygilbreath.com

Foreign Limited Liability Company Ashley Freeman Gilbreath Interior Design, L.L.C.

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	<i>;</i>	COVER LETTER
TO: Re	gistration Section	. V
. Div	vision of Corporations	
	Ashley Freeman Gilbreath Interior Design,	L.L.C.
SUBJECT:	Name	e of Limited Liability Company
The enclose Existence a	d "Application by Foreign Limited Liability (and check are submitted to register the above :	Company for Authorization to Transact Business in Florida," Certificate o referenced foreign limited liability company to transact business in Florida.
	n all correspondence concerning this matter to	
	Farrar J. Barker	
		Name of Person
	Barker Williams, PLLC	Name of Person Firm/Company Address
		Firm/Company
	CO Clauser Long Suits B	
	60 Clayton Lane, Suite B	
		Address
	Santa Rosa Beach, Fl. 32459	/
		City/State and Zip Code
	ashley@ashleygilbreath.com	
	E-mail address: (to be	e used for future annual report notification)
For further:	information concerning this matter, please ca	111.
l;a	irrar J. Barker	850 308-7033
	Name of Contact Person	at () Area Code Daytime Telephone Number
X1:	ailing Addre <u>ss:</u>	Street Address:
	egistration Section	Registration Section
	ivision of Corporations	Division of Corporations
	O. Box 6327	The Centre of Tallahassee
Ta	illahassee, FL 32314	2415 N. Monroe Street, Suite 810
	·	Tallahassee, FL 32303
- Fin	sclosed is a check for the following amount.	
Ple	ease make check payable to FLORIDA DEI	PARTMENT OF STATE
	\$125.00 Filing Fee S130 00 Filing Fe	ee & 🗐 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certificate

Certificate of Status

Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN HMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Ashley Freeman Gilbreath Interior Design, L.L.C.

ame unavailable, enter alternate r	mme adopted for the purpose of transacting business in F	londa. The elte	rrate name must include "Lim	ited Liability Comp	oany," "L L C	, ar LLC
Alabama		2		₹).	202	
(Jurisdiction under the law of w	high foreign limited liability company is organized)	3	(FE	number, il applica	ble)	
					Ö	
				: .	_	
	(Date first transacted business in Florida, if prior to	registration)			12	
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	nine penalty liab	oday)	1	-0	
82 S. Barrett Square		Pe	O Box 611013			
et Address of Frincipal Office)	<u> </u>	6	(Mailing Address)			
et Addens de redicipat Othice)			,			
Unit 2E						
<u> </u>		_				
		D	osemary Beach, FL 3	2461		
Inlet Beach, FL 32461		IX.	oscining beach. 1115	2401		
	es of Florida registered agent: (P.O. Bo					
	ss of Florida registered agent: (P.O. Bo Ashley Gilbreath					
Name and street address Name.	Ashley Gilbreath					

S.	For initial indexing purposes.	, list names, title o	r capacity and address	es of the primary	members/managers or	persons authorized to
	nage [up to six (6) total].					

Title or Capacity:	Name and Address:	Title or Capacity	Name and Address:
■ Manager	Name. Ashley Gilbreath	□Manager	Name.
□Member	Address: 82 S. Barrett Square, Unit 2E	□Member	Address.
□Authorized	Inlet Beach, FL 32461	□Authorized	
Person		Person	120 NO
Other	□ Other	□Other	Other
			2
□Manager	Name	□Manager	Name:
□Member	Address,	□Member	Address.
□Authorized		□Authorized	
Person		Person	
Other	Other	□Other	Other
□Manager	Name.	□Manager	Name.
□Member	Address	□Member	Address.
□Authorized		□Authorized	
Person		Person	
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 1 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.

	Ashley Gilbrath	
· · · · · · · · · · · · · · · · · · ·	Signature each and Educate 19th rsor.	
	Ashley Gilbreath	
	Eyned or gruted name of stance	

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, Al. 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State. do hereby certify that

the entity records on file in this office disclose that Ashley Freeman Gilbreath Interior Design, L.L.C. was formed in Montgomery County, Alabama on June 13, 2006. The Alabama Entity Identification number for this entity is 480 10. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20201014000028508

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

10/14/2020

Date

X 74. Merill

John H. Merrill

Secretary of State