

M20000010335

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

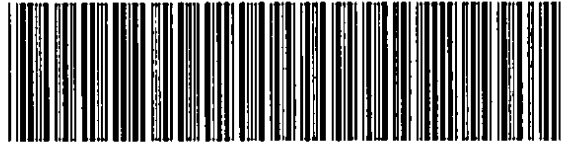
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200354598982

11/10/20--01015--027 **160.00

11/10/20 11:56:45
200354598982

11/10/20 11:56:45
200354598982

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Veterans Realty Services
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Heather Chase
Name of Person

Veterans Realty Services
Firm/Company

3021 Fort Campbell Blvd
Address

Clarksville, TN 37042
City/State and Zip Code

Heather.Chase@vrsagent.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Heather Chase at (615) 459-8706
Name of Contact Person Area Code Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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. Veterans Realty Services, 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. Tennessee 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3021 Ft. Campbell Blvd
(Street Address of Principal Office)

6. 3021 Ft. Campbell Blvd
(Mailing Address)

Clarksville, TN 37040

Clarksville, TN 37040

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

Name: Heather Chase

Office Address: 18655 US-331

Freeport, Florida 32439
(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.

Heather Chase
(Registered agent's signature)

20 NOV 10 PM 5:45

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:

Title or Capacity:

Name and Address:

☐ Manager

Name: Heather Chase

☐ Manager

Name: _____

☒ Member

Address: 3021 Fort Campbell Blvd

☐ Member

Address: _____

☐ Authorized

Clarksville, TN 37042

☐ Authorized

Person

Person

☐ Other _____

☐ Other _____

☐ Other _____

☐ Other _____

☐ Manager

Name: Matthew Peas

☐ Manager

Name: _____

☒ Member

Address: 2318 Friwaze Rd

☐ Member

Address: _____

☐ Authorized

Columbia, TN 38401

☐ Authorized

Person

Person

☐ Other _____

☐ Other _____

☐ Other _____

☐ Other _____

☐ Manager

Name: John Peterson

☐ Manager

Name: _____

☒ Member

Address: 1435 Cedar Ln

☐ Member

Address: _____

☐ Authorized

Clarksville, TN 37042

☐ Authorized

Person

Person

☐ Other _____

☐ Other _____

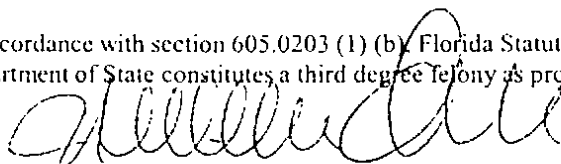
☐ Other _____

☐ 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 the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Signature of an authorized person

Heather Chase

Typed or printed name of signer



Tre Hargett
Secretary of State

Division of Business Services

Department of State

State of Tennessee

312 Rosa L. Parks AVE, 6th FL

Nashville, TN 37243-1102

HEATHER CHASE
3021 FT. CAMPBELL BLVD
CLARKSVILLE, TN 37042

November 2, 2020

Request Type: Certificate of Existence/Authorization

Request #: 0388262

Issuance Date: 11/02/2020

Copies Requested: 1

Document Receipt

Receipt #: 005870823

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3792095999

\$20.00

Regarding: Veterans Realty Services LLC

Filing Type: Limited Liability Company - Domestic

Control #: 886320

Formation/Qualification Date: 02/03/2017

Date Formed: 02/03/2017

Status: Active

Formation Locale: TENNESSEE

Duration Term: Perpetual

Inactive Date:

Business County: MONTGOMERY COUNTY

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

Veterans Realty Services 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.

Tre Hargett
Secretary of State

Processed By: Cert Web User

Verification #: 042630117