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(Requestor's Name)				
(Add	dress)			
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(City	//State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to F				
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Office Use Only



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12/4/20

COVERLETTER

TO:		istration Section sion of Corporations				
SUBJ	ECT:	Harris Mortgage & Propertis, LLC				
SUBJECT:Name of Limited Liability Company						
The er Existe	nclosed nce, an	"Application by Foreign Limited Liability deheck are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate referenced foreign limited liability company to transact business in Flori			
Please	return	all correspondence concerning this matter to	o the following:			
		Daniel S. Harris	;			
			Name of Person			
		Harris Mortgage & Properties, LLC				
			Firm/Company			
		5718 Woodland Trail				
			Address			
		Trussville, AL 35173				
		Ci	ity/State and Zip Code			
		Lynnharris88@outlook.com				
			used for future annual report notification)			
For fur	ther in	formation concerning this matter, please cal	l:			
	Roge	er A. Barlow, CPA	205 836-3380 at ()			
		Name of Contact Person	Area Code Daytime Telephone Number			
	Regi Divi P.O.	ing Address: istration Section sion of Corporations Box 6327 ahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Pleas	osed is a check for the following amount: e make check payable to: FLORIDA DEP, 25.00 Filing Fee \$130.00 Filing Fee Certificate of	& 🗆 \$155.00 Filing Fee & 🗆 \$160.00 Filing Fee, Certificate			

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA SEATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPAIN' TOTRANSACT BUSINESS. IN THE SEATE OF FLORIDA:

main marananc, cite attende	name adopted for the purpose of transacting business in Flori	da. The alternate name must include "Limited Liability Company," "	LLC," or "LLC	
Alabama		26-1173750		
(Justifiction under the law of which foreign limited liability company is organized)		3. (FEI number, if applicable)		
11/30/20			•	
	(Date first transacted business in Florida, if prior to reg (See sections 605 0904 & 605 0905, F.S. to determine	stration) pensity liability)		
5718 Woodland Trail		5718 Woodland Trail		
reet Address of Principal Office)		Ó. (Mailing Address)		
				
Trussville, AL 35173		Trussville, AL 35173	Frussville, AL 35173	
Name and street addres	s of Florida registered agent: (P.O. Box)	I <u>OT</u> acceptable)		
	InCom Survious Inc			
Name:	InCorp Services, Inc.			
Office Address 17888 67th Court North				
	Loxahatchee	Florida 33470 (Zp vode)		
	(City)	(Zm code)		

Kathy Shin on behalf of InCorp Services, Inc.

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: Daniel S. Harris	□Manager	Name:
■Member	Address: 5718 Woodland Trail	□Member	Address:
□Authorized		□Authorized	
Person	Trussville, AL 35173	Person	
Other	○ Other	□Other	Other
□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	□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

Daniel S. Harris

Typed or printed name of signee

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 Harris Mortgage & Properties, LLC was formed in Jefferson County, Alabama on October 3, 2007. The Alabama Entity Identification number for this entity is 410-685. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20201125000006424

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.

11/25/2020

Date

X. W. Menill

John H. Merrill

Secretary of State