Ma100000087

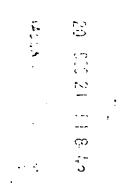
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300355864833

12/08/20--01021--019 **130.00



**	4	•	COVER LETTE	R 💅	*		6
TO: Re	gistration Section vision of Corporations	•			аћ		
SUBJECT:	EQUITY ESTATES V	VATERSOUN		; 		<u>-</u>	_ _
500000			Name of Limited Liabil	ity Compan	y		
The enclose Existence, a	ed "Application by Forei and check are submitted	gn Limited Lia to register the a	bility Company for Authorbove referenced foreign	orization to limited liab	Transact Busir lity company (ness in Floric to transact bu	la," Certificate of usiness in Florida.
Please retur	n all correspondence co	ncerning this m	atter to the following:				
	David B. Pleat, E	sq.					
			Name of Person				_
	Pleat & Perry, P.A	A .					_
			Firm/Company				
	4477 Legendary I	Orive, Suite 20	2				
			Address				_
	Destin, FL 3254	I					
		<u> </u>	City/State and Zip C	Code			_
	theresa@pleatperry						
	<u></u>	E-mail address	: (to be used for future an	nual report	notification)		_
For further	information concerning	this matter, ple	ease call:				
D	avid B. Pleat		850	650-	0599		

David B. Pleat		850	650-0599
	Name of Contact Person	at (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

Unaloged is a check	c for the following amou	nt.					
Eliciosed is a check	(10) the following amou						
Diago make check	payable to: FLORIDA	DEP	ART	MEN	T OF	STATI	Ŀ
1 lease make check	payable to: 1 Boltoni						
			•		ሮነርር	00 E::::-	

□ \$125.00 Filing Fee ■ \$130.00 Filing Fee & □ \$155.00 Filing Fee &

Certified Copy Certificate of Status

☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy



December 10, 2020

DAVID B PLEAT, ESQ 4477 LEGENDARY DR STE 202 DESTIN, FL 32541

SUBJECT: EQUITY ESTATES WATERSOUND, LLC

Ref. Number: W20000140215

We have received your document for EQUITY ESTATES WATERSOUND, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 120A00024816



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:

EQUITY ESTATES WATER							
(Name of Foreign L	imited Liability Company; must include "Li	mited Liability Co	ompany," "L.L.C.,	' от "LLC.")			
name unavailable, enter alternate na	me adopted for the purpose of transacting business	s in Florida. The alter	nate name must inch	ide "Limited I	Liability Comp	iny," "L.L.(C," or "LL
GEORGIA		_ 3	47-0975675				
(Jurisdiction under the law of wh	ch foreign limited liability company is organized)			(FEI nun	nber, if applicab	ole)	
MAY :	15, 2014						
	(Date first transacted business in Florida, if pr (See sections 605.0904 & 605.0905, F.S. to de	ior to registration.) etermine penalty liab	ility)				
4477 LEGENDARY	DRIVE	6	(Mailing Address				
et Address of Principal Office)			(Mailing Address)			
SUITE 202							
DESTIN, FL 3254	I				-	^. >	
							
Name and street address	of Florida registered agent: (P.O.	Box NOT acco	eptable)			(7)	
						22	:
Name:	DAVID E. PLEAT					·,	• •
Office Address:	4477 LEGENDARY DRIVE,	SUITE 202	<u>. </u>		٠٠ ع) (3)	
	DESTIN		, Florida _	32541			
	(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:	Title or Capacit	y:	Name and Address
Z Manager	Name: PHILIP MEKELBURG	□Manager	Name:	
□Member	Address: 750 HAMMOND DR.	□Member	Address:	
☐Authorized	BUILDING 6, STE 300	□Authorized		
Person	ATLANTA, GA 30328	Person		
Other	Other	□Other		Other
J Manager	Name:	□Manager	Name:	
Member	Address:	□Member	Address:	<u>.</u>
Authorized		□Authorized		
Person		Person		
Other	Other	Other		Other
] Manager	Name:	□Manager	Name:	
Member	Address:	□Member	Address:	· ·····
Authorized		□Authorized		
Person		Person		
Other	Other	Other		Other

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

PHILIP MEKELBURG

lyped or printed name of signee

Control Number: 14038676

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

Equity Estates Watersound, 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 : 19862667 Date Inc/Auth/Filed : 04/18/2014 Jurisdiction : Georgia Print Date : 12/18/2020

Form Number : 211



Brad Rafforspage

Brad Raffensperger Secretary of State