# M21000001990

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PICK-UP	☐ WAIT	MAIL
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 669986 4802701

AUTHORIZATION :

COST LIMIT : (\$' \cdot 125.00

ORDER DATE: February 17, 2021

ORDER TIME : 11:45 AM

ORDER NO. : 669986-005

CUSTOMER NO: 4802701

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# FOREIGN FILINGS

NAME: SIDDIQI INVESTMENTS LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER:

# COVER LETTER

CHD IFCT.	Siddiqi Investments LLC	
SUBJECT:		me of Limited Liability Company
		y Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florid
Please return	all correspondence concerning this matter	r to the following:
	HEETESH PATEL	
	····	Name of Person
	SIDDIQI INVESTMENTS, LLC	20 S
	· · · · · · · · · · · · · · · · · · ·	Firm/Company
	706 WALNUT ST, SUITE 600	Firm/Company
		Address
	KNOXVILLE, TN 37902	Address  City/State and Zip Code
		City/State and Zip Code
	ROSEMARY@THE706.COM	
	E-mail address: (to	be used for future annual report notification)
For further int	formation concerning this matter, please of	call:
ROS	SEMARY HINTON	865 633-6524 EXT 17
	Name of Contact Person	at () Area Code Daytime Telephone Number
Regi Divi	ing Address: stration Section sion of Corporations	Street Address: Registration Section Division of Corporations
	Box 6327 ahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Please	ised is a check for the following amount: e make check payable to: FLORIDA DE 25.00 Filing Fee S130.00 Filing F Certificate	ee & 🗆 \$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 STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Jurisdiction under the law of what the law of	(Date first transacted business in Florida, if prior to n (See sections 605.0904 & 605.0905, F.S. to determin	GFEI number, a (FEI number, a fegistration ) Greatly liability)	applicable)
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		egistration) te penaity liability)	
		egistration ) te penalty liability)	<b>一</b> が
	ET. STE 600		-(1) 00
et Address of Principal Office)	-·, - · <del>-</del>	706 WALNUT STREET, ST	600 00
•		(Mailing Address)	방우 로 E
KNOXVILLE, TN 3790	02	KNOXVILLE, TN 37902	EE, F
	Corporation Service Company		
Name:			
	1201 Hays Street		
Name: Office Address:		32301 Florida	

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: Name: HEETESH PATEL ■ Manager □Manager Name: Address: 1620 CHARLOTTESVILLE BL∜D □Member □Member Address: KNOXVILLE, TN 37922 □ Authorized ☐ Authorized Person Person Other \_\_\_\_\_ □Other □Other\_\_ NADEEM SIDDIQI □Manager □Manager 1916 MOBLEY WAY #207 ■Member □Member Address: KNOXVILLE, TN 37922 □ Authorized □ Authorized Person Person □Other\_\_\_ □Other\_\_\_\_\_ Other\_ Other \_\_\_\_ □ Manager Name: \_\_\_\_\_ □Manager □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. Nonindexed 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 HEETESH PATEL

Typed or printed name of signee



# Division of Business Services **Department of State**

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

# **HEETESH PATEL**

ROSEMARY HINTON

600

706 WALNUT ST

KNOXVILLE, TN 37902

Request Type: Certificate of Existence/Authorization

Request #:

0403428

Issuance Date: 02/17/2021

Copies Requested:

**Document Receipt** 

Receipt #: 006077368

Payment-Credit Card - State Payment Center - CC #: 3799325218

February 17, 2021

Regarding:

Siddiqi Investments, LLC

Filing Type:

Limited Liability Company - Domestic

Formation/Qualification Date: 12/04/2012

Status:

Active

**Duration Term:** Perpetual

Business County: KNOX COUNTY

Control #:

Date Formed:

Formation Locale: TENNESSEE

Inactive Date:

### 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

# Siddigi Investments, 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.

Secretary of State

Verification #: 044539631

Processed By: Cert Web User