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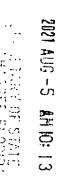
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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AUG 10 2021 M. SOLOMON

COVER LETTER

	egistration Section ivision of Corporations			
SHRIECT	Faithful Guardian, LLC			
SOBJECT	. Nam	Name of Limited Liability Company		
The enclose Existence,	ed "Application by Foreign Limited Liability and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Cert referenced foreign limited liability company to transact business i	ificate of n Florida.	
Please retur	rn all correspondence concerning this matter t	o the following:		
	Thomas Woodruff			
		Name of Person		
	Faithful GuardianyLLC			
Firm/Company				
	285 Carrollton Street			
	····	Address		
	Temple, GA 30179			
	C	ity/State and Zip Code		
	Info@FGTC.com			
	E-mail address: (to be	used for future annual report notification)		
For further	information concerning this matter, please cal	H:		
Nikie Shelby		at () 214-2252 Area Code Daytime Telephone Number		
	Name of Contact Person	Area Code Daytime Telephone Number		
	ailing Address:	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		

Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE

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: Faithful Guardian, 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 afternate name must include "I initied I labelity Company," = I. I. C. " or "I.I.C." or "I.I.C." Secretary of State- Georgia 20-3920593 Oursidiction under the law of which foreign limited liability company is organized) (I lit number, if applicable) NA (Date first transacted business in Florids, (I prior to registration.) (See sections 695,0904 & 605,0905, F.S. to determine penalty liability) Faithful Guardian LLC Faithful Guardian LLC (Street Address of Principal Office) (Mailing Address) 285 Carrollton Street 285 Carrollton Street Temple, GA 30179 Temple, GA 30179 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Danny Fureigh Name:

Registered agent's acceptance:

Office Address:

1413 Utility Drive

Navarre, FL

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.

. Florida

(Registered agent Aignature)

(City)

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: Thomas Woodruff Name: ____Rachel Smith ■Manager □Manager Address: 285 Carrollton Street Address: 285 Carrollton Street □ Member □ Member Temple, GA 30179 Temple, GA 30179 □ Authorized Authorized Person Person □ Other Other____ □Other Other Name: Jordan Shelby □Manager □Manager Address: _____ Address: 285 Carrollton Street □Member □Member Temple, GA 30179 Navarre, FL 32566 ■Authorized **■** Authorized Person Person Other □Other____ □Other _____ □Other · □Manager □Manager Name: □Member Address: ____ ______ □Member ☐ 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 aghird degree felony as provided for in s.817.155, F.S.

> uthorized person Thomas Woodruff

> > Typed or printed name of signee

Control Number: 0605613

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I. Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

FAITHFUL GUARDIAN, 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 : 21745606 Date Inc/Auth/Filed: 01/10/2006 Jurisdiction : Georgia Print Date : 08/02/2021

Form Number . 211



Brad Raffonspager

Brad Raffensperger Secretary of State