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COVER LETTER

Registration Section

TO:

Div	ision of Corporations						
SUBJECT:	SEREIS, LLC						
Name of Limited Liability Company							
		Liability Company for Authorization to Transact Business in Florida," Certificate of the above referenced foreign limited liability company to transact business in Florida.					
Please return	n all correspondence concerning th	is matter to the following:					
	Tom James Beatty, JR						
	Name of Person						
	SEREIS, LLC						
	Firm/Company						
	119 Creek Plantation Dr.						
	Address						
	Athens, GA 30606						
		City/State and Zip Code					
	jim.beatty@getsereis.com						
	E-mail add	ress: (to be used for future annual report notification)					
For further in	nformation concerning this matter	please call:					
Jim	n Beatty	706 424-8404 at ()					
	Name of Contact Pe	rson Area Code Daytime Telephone Number					
Mailing Address: Registration Section Division of Corporations		Street Address: Registration Section Division of Corporations					
	D. Box 6327 Ilahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Plea	\$125.00 Filing Fee	amount: RIDA DEPARTMENT OF STATE Divide Filing Fee & Sissing Fee, Certificate ertificate of Status Certified Copy 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:

SEREIS, LLC						
(Name of Foreign)	Umited Liability Company; must include "Limite	d Liability Compa	ny," "L.L.C.," or "LLC.")			
(If name wavallable, enter alternate o	ame adopted for the purpose of transacting business in F	lorida. The alternate	name emat include "Limited Liab	oility Company," "L.L.C," or "L.L.C.")		
GEORGIA		82-5	274376			
2(Jurisdiction under the law of w	hich foreign limited liability company is organized)	rganized) (FEI mimber, if applicable)				
4.						
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration.) ine penalty liability)				
119 CREEK PLANTA	TION DR.		REEK PLANTATION	DR		
Street Address of Principal Office)		6. (Mailing Address)				
ATHENS, GA 30606		ATHENS, GA 30606				
-			<u> </u>			
7. Name and street addres	s of Florida registered agent: (P.O. Box	NOT accepts	ible)	21		
Name:	InCorp Services, Inc.					
Office Address:	17888 67th Court North					
	Loxahatchee		33470 , Florida	2: C		
	(City)		(Zip code)	- ω		

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 Capacity:		Name and Address:
□Manager	Name: TOM J BEATTY JR	□Manager	Name:	
■Member	Address: 225 BULL BRAY RD	□Member	Address:	
□Authorized	STEPHENS, GA 30667	□Authorized		
Person	· · · · · · · · · · · · · · · · · · ·	Person		
Other	Other	☐ Other		□ Other
□Manager	Name: DOUG O'BRYAN	□Manager	Name:	
■Member	Address:	□Member		
□Authorized	DR.	□Authorized		
Person	ATHENS, GA 30606	Person		
□Other	Other	□Other		□Other
□Manager	Name: JAMES O'BRYAN	□Manager	Name:	
■Member	Address:	□Member		
□Authorized	DR.	□Authorized		
Person	ATHENS, GA 30606	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

TOM JAMES BEATTY JR

Typed or printed name of signee

Control Number: 18032362

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

SEREIS, 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-facic evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 22045566
Date Inc/Auth/Filed: 02/09/2018
Jurisdiction : Georgia
Print Date : 10/25/2021

Form Number : 211



Brad Raffersperger

Brad Raffensperger Secretary of State