

W21000016020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

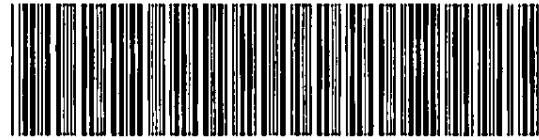
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S. FRANKLIN

DEC - 1 2021

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Atlas Interiors, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Rebekah Woodard

Name of Person

Atlas Interiors, LLC d/b/a Rebekah Woodard Interiors

Firm/Company

P. O. Box 210121

Address

Nashville, TN 37221

City/State and Zip Code

patty.dondeville@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patty Dondeville

at (615) 972.0413

Name of Contact Person

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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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TALLAHASSEE, FL

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:

1. Atlas Interiors, L.L.C.
(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 alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Nashville, TN
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 26-1595407
(FEI number, if applicable)

4. 11/10/2021
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 905 George Bush Blvd.
(Street Address of Principal Office)

6. P. O. Box 210121
(Mailing Address)

Delray Beach, FL

Nashville, TN

33483

37221

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Rebekah Woodard

Office Address: 817 N Ocean Blvd, Unit 1

Delray Beach, Florida 33483
(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.

Rebekah Woodard
(Registered agent's signature)

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CLERK OF CIRCUIT COURT
MIAMI-DADE COUNTY, FL

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]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: <u>Rebekah Woodard</u>	<input checked="" type="checkbox"/> Manager	Name: <u>Lindsey Baur</u>
<input checked="" type="checkbox"/> Member	Address: <u>905 George Bush Blvd</u>	<input type="checkbox"/> Member	Address: <u>905 George Bush Blvd.</u>
<input type="checkbox"/> Authorized	<u>Delray Beach, FL</u>	<input type="checkbox"/> Authorized	<u>Delray Beach, FL</u>
Person	<u>33483</u>	Person	<u>33483</u>
<input checked="" type="checkbox"/> Other ^{Owner} <u>MGRM</u>	<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Other <u>MGR</u>	<input type="checkbox"/> Other _____
<input checked="" type="checkbox"/> Manager	Name: <u>Patricia F. Donderville</u>	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: <u>7158 Birch Bark Dr.</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	<u>Nashville, TN</u>	<input type="checkbox"/> Authorized	_____
Person	<u>37221</u>	Person	_____
<input checked="" type="checkbox"/> Other <u>Accounting</u> <u>MGR</u>	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	_____
<input checked="" type="checkbox"/> Manager	Name: <u>Kelley McCarthy</u>	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: <u>2912 Sisco Dr.</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	<u>Nashville, TN 37204</u>	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input checked="" type="checkbox"/> Other <u>MGR</u>	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> 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.

Patricia F. Donderville
Signature of an authorized person



Tre Hargett
Secretary of State

Division of Business Services
Department of State

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

ATLAS INTERIORS, LLC
REBEKAH WOODARD
2912 SIDCO DRIVE
NASHVILLE, TN 37204

November 2, 2021

Request Type: Certificate of Existence/Authorization
Request #: 0443543

Issuance Date: 11/02/2021
Copies Requested: 1

Document Receipt

Receipt #: 006705540

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3817299751

\$20.00

Regarding: ATLAS INTERIORS, LLC

Filing Type: Limited Liability Company - Domestic

Control #: 542657

Formation/Qualification Date: 03/01/2007

Date Formed: 03/01/2007

Status: Active

Formation Locale: TENNESSEE

Duration Term: Perpetual

Inactive Date:

Business County: DAVIDSON COUNTY

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

ATLAS INTERIORS, 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.

Tre Hargett

Tre Hargett
Secretary of State

Processed By: Cert Web User

Verification #: 049615123



2021 NOV 29 PM 12:35

FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 13, 2021

REBEKAH WOODARD
P O BOX 210121
NASHVILLE, TN 37221 US

SUBJECT: ATLAS INTERIORS, LLC
Ref. Number: W21000146605

We have received your document for ATLAS INTERIORS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

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.

Sharon D Franklin
Regulatory Specialist II

Letter Number: 621A00027602