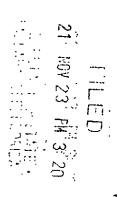
M2100016109

(Requestor's	Name)
(Address)	· · · · · · · · · · · · · · · · · · ·
(Address)	
(City/State/Zip	/Phone #)
PICK-UP W	AIT MAIL
(Business En	ity Name)
(Document Ni	umber)
Certified Copies Cert	ificates of Status
Special Instructions to Filing Offic	er:
1	
Office L	lse Only



900377024059

11/23/21--01021--016 **130.00



DEC - S SOSI

COVER LETTER

TO:	Registration Section Division of Corporations				
	Reliant Real Estate Partner	s LLC			
SUBJE	ECT:	Name of Limited Liability Company			
The end Existen	closed "Application by Foreign Lince, and check are submitted to reg	mited Liability Company for Authorization to Transact Business in Florida." Certificate of gister the above referenced foreign limited liability company to transact business in Florida.			
Please	return all correspondence concern	ing this matter to the following:			
	Adam K. Richards				
		Name of Person			
	Reliant Real Estate Par	rtners LLC			
		Firm/Company			
	3565 Piedmont Road, Building 2, Suite 740				
	Address				
	Atlanta, GA 30305				
		City/State and Zip Code			
	arichards@reliant-re.com	n			
	E-mai	l address: (to be used for future annual report notification)			
For furt	ther information concerning this m	natter, please call:			
	Adam K. Richards	404 760-7181 at ()			
	Name of Conta	ct Person Area Code Daytime Telephone Number			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327		Street Address:			
		Registration Section			
		Division of Corporations			
		The Centre of Tallahassee			
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
		wing amount: **CLORIDA DEPARTMENT OF STATE** 30.00 Filing Fee &			

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLANCE WITH SECTION 05:0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

fname unavailable, enter alternate	name adopted for the purpose of transacting business in Fl	lorida. The alternate name must include "Limited I	liability Company ""L.L.C." or "LLC	
State of Georgia		46-1897451		
(Jurisdiction under the law of which foreign limited liability company is organized)		3(FEI number, if applicable)		
N/A				
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determine	registration) ine penalty liability (
3565 Piedmont Road		3565 Piedmont Road		
rect Address of Principal Office)		6. (Mailing Address)		
Building 2, Suite 740	1	Building 2, Suite 740		
Atlanta, GA 30305		Atlanta, GA 30305		
Name and street addre	ss of Florida registered agent: (P.O. Box	NOT acceptable)	WOV [7]	
			TLED 23 PM	
Name:	Sharon Dennis			
Name: Office Address:	12239 Arbor Drive		<u>ခြော်</u> မှ	
		32082 Florida		
	12239 Arbor Drive	. Florida 32082 (Zip code)	<u>ခြော်</u> မှ	

(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: Name: Tyler Fann Adam K. Richards ■ Manager □ Manager Address: L. 3565 Piedmont Road Address: 3565 Piedmont Road □Member ■ Member Building 2, Suite 740 Building 2. Suite 740 □ Authorized □ Authorized Atlanta, GA 30305 Atlanta, GA 30305 Person Person □Other □Other__ □Other □Other_____ □Manager □Manager Address: 3565 Piedmont Road □Member □Member Address: _____ Building 2, Suite 740 Authorized □ Authorized Atlanta, GA 30305 Person Person □Other Other__ □Other □Other_____ □Manager □Manager Name: _____ □Member Address: □Member Address: _____ ☐ Authorized ☐ Authorized Person Person

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.

□Other___

Other____

□Other_____

- 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 Adam K. Richards

Typed or printed name of signee

Control Number: 13040430

STATE OF GEORGIA

Secretary of State

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

CERTIFICATE OF EXISTENCE

the state of the s
I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of
my office that
my office diat
Reliant Real Estate Partners LEC
a Domestic Limited Liability Company
H C C C C C C C C C C C C C C C C C C C
was formed in the jurisdiction-stated below or was authorized to transact business in Georgia on the
was formed in the jurisdiction stated below or was authorized to transact journess 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
of winds a notice of ment to dissolve an application for windsawar, 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.
to the state of the desired to the state of the state.
Dyschat Number > 21952549

Docket Number : 21852548
Date Inc/Auth/Filed: 01/22/2013
Jurisdiction : Georgia
Print Date : 09/21/2021
Form Number : 211



Bad Rafforger

Brad Raffensperger Secretary of State