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(Requestor's Name)

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(City/State/Zip/Phone #)

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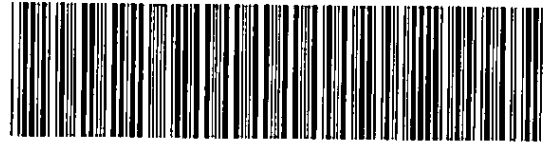
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 JAN -3 PM 12:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Go Getters, 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:

Gabriela Cader

Name of Person

Hutton

Firm/Company

736 Cherry Street

Address

Chattanooga, TN 37402

City/State and Zip Code

legalnotices@hutton.build

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

For further information concerning this matter, please call:

Gabriela Cader

423

619-8201

at ()

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

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. Go Getters, 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 alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Deleware 3. 87-4126062
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0903, F.S. to determine penalty liability)

5. 736 Cherry Street 6. 736 Cherry Street
(Street Address of Principal Office) (Mailing Address)
Chattanooga, TN 37402 Chattanooga, TN 37402

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

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(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.

Dwight Cates, Vice President
(Registered agent's signature)

FILED
2022 JAN -3 PM 12:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

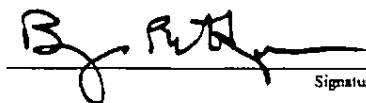
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<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>Karen J. Hutton</u>	<input type="checkbox"/> Manager	Name: <u>Aaron Breeden</u>
<input type="checkbox"/> Member	Address: <u>736 Cherry Street</u>	<input type="checkbox"/> Member	Address: <u>736 Cherry Street</u>
<input type="checkbox"/> Authorized	<u>Chattanooga, TN 37402</u>	<input checked="" type="checkbox"/> Authorized	<u>Chattanooga, TN 37402</u>
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: <u>Benjamin P. Harper</u>	<input type="checkbox"/> Manager	Name: <u>Douglas J. Kyle</u>
<input type="checkbox"/> Member	Address: <u>736 Cherry Street</u>	<input type="checkbox"/> Member	Address: <u>736 Cherry Street</u>
<input checked="" type="checkbox"/> Authorized	<u>Chattanooga, TN 37402</u>	<input checked="" type="checkbox"/> Authorized	<u>Chattanooga, TN 37402</u>
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: <u>Michael Deering</u>	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: <u>736 Cherry Street</u>	<input type="checkbox"/> Member	Address: _____
<input checked="" type="checkbox"/> Authorized	<u>Chattanooga, TN 37402</u>	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<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.



Signature of an authorized person

Benjamin P. Harper

Typed or printed name of signee

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. Go Getters, 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 alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

87-4126062

3.

(FEI number, if applicable)

4.

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

736 Cherry Street

5. (Street Address of Principal Office)

Chattanooga, TN 37402

736 Cherry Street

6.

(Mailing Address)

Chattanooga, TN 37402

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

Name:

Corporation Service Company

Office Address:

1201 Hays Street

Tallahassee

(City)

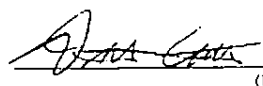
, Florida

32301

(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.

 Dwight C. Catts, Vice Pres. Ltd.
(Registered agent's signature)

<p><u>Title or Capacity:</u></p> <p><input checked="" type="checkbox"/> Manager Name: <u>Karen J. Hutton</u></p> <p><input type="checkbox"/> Member Address: <u>736 Cherry Street</u></p> <p><input type="checkbox"/> Authorized <u>Chattanooga, TN 37402</u></p> <p>Person _____</p> <p><input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Manager Name: <u>Benjamin P. Harper</u></p> <p><input type="checkbox"/> Member Address: <u>736 Cherry Street</u></p> <p><input checked="" type="checkbox"/> Authorized <u>Chattanooga, TN 37402</u></p> <p>Person _____</p> <p><input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Manager Name: <u>Michael Deering</u></p> <p><input type="checkbox"/> Member Address: <u>736 Cherry Street</u></p> <p><input checked="" type="checkbox"/> Authorized <u>Chattanooga, TN 37402</u></p> <p>Person _____</p> <p><input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____</p>	<p><u>Title or Capacity:</u></p> <p><input type="checkbox"/> Manager Name: <u>Aaron Breeden</u></p> <p><input type="checkbox"/> Member Address: <u>736 Cherry Street</u></p> <p><input checked="" type="checkbox"/> Authorized <u>Chattanooga, TN 37402</u></p> <p>Person _____</p> <p><input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Manager Name: <u>Douglas J. Kyle</u></p> <p><input type="checkbox"/> Member Address: <u>736 Cherry Street</u></p> <p><input checked="" type="checkbox"/> Authorized <u>Chattanooga, TN 37402</u></p> <p>Person _____</p> <p><input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Manager Name: _____</p> <p><input type="checkbox"/> Member Address: _____</p> <p><input type="checkbox"/> Authorized _____</p> <p>Person _____</p> <p><input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____</p>
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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)


Signature of an authorized person

Benjamin P. Harper
Typed or printed name of signee

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GO GETTERS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-EIGHTH DAY OF DECEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GO GETTERS, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF NOVEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



6418649 8300

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 205098013