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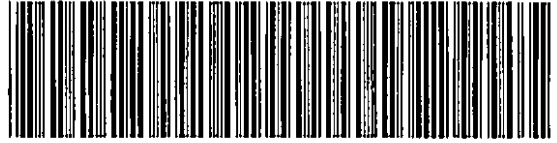
(Business Entity Name)

(Document Number)

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2022 APR 19 AM 10:14

CLERK OF THE STATE
TALLAHASSEE, FLORIDA

T. LEMIEUX

APR 20 2022

W22
44971

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HG Managing Agency, 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:

Justin Edenfield or Seabron Chad Fears, Esq.

Name of Person

HG Managing Agency, LLC

Firm/Company

6265 Old Water Oak Road, Suite 204

Address

Tallahassee, FL 32312

City/State and Zip Code

CFears@hgmanaging.com

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

For further information concerning this matter, please call:

Seabron Chad Fears

850

209-7747

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 5, 2022

JUSTIN EDENFIELD
6265 OLD WATER OAK RD STE 204
TALLAHASSEE, FL 32312

SUBJECT: HG MANAGING AGENCY, LLC
Ref. Number: W22000044971

We have received your document for HG MANAGING AGENCY, 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 122A00007923

HG Managing Agency, LLC

2115 E 7th Street, Suite 101, Charlotte, NC 28204

April 19, 2022

RE: Name Release Letter

Florida Department of State
Division of Corporations
Attn: Kyle Brumbley
Via E-mail

Mr. Brumbley –

Please accept this letter of our intention to dissolve HG Managing Agency, LLC, a Florida Limited Liability Company, which was inadvertently registered on Sunbiz.org as a Florida entity. HG Managing Agency, LLC is a North Carolina entity and wishes to register in Florida as a foreign entity. We have no intention or re-registering the name or organization as a Florida entity.

Please allow this letter to serve as authorization to register HG Managing Agency, LLC, a North Carolina Limited Liability Company, as a foreign entity with your office.

Please let me know if there are any questions or if you need any additional information.

With sincere thanks,



Seabron Chad Fears, Esq.

Vice-President of Operations
HG Managing Agency, LLC

**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. HG Managing Agency, 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. North Carolina 3. 87-2818723
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. March 8, 2022
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S., to determine penalty liability)

5. HG Managing Agency, LLC
(Street Address of Principal Office)

6. HG Managing Agency, LLC
(Mailing Address)

6265 Old Water Oak Road, Suite 204

6265 Old Water Oak Road, Suite 204

Tallahassee, FL 32312

Tallahassee, FL 32312

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

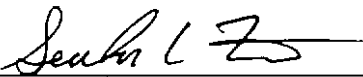
Name: Seabron Chad Fears, Esq.

Office Address: 6265 Old Water Oak Road, Suite 204

Tallahassee 32312
(City) , Florida (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.


(Registered agent's signature)

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2022 APR 19 AM 10:14
SEC. 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>HG Holdings, Inc.</u>	<input type="checkbox"/> Manager	Name: _____
<input checked="" type="checkbox"/> Member	Address: <u>2115 E 7th Street, Suite 101</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	<u>Charlotte, NC 28204-3307</u>	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<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

Seabron Chad Fears

Typed or printed name of signer



NORTH CAROLINA

Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

HG MANAGING AGENCY, LLC

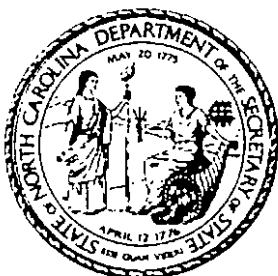
is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 27th day of September, 2021

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger, or articles of conversion for said limited liability company.

IN WITNESS WHEREOF, I have hereunto set
my hand and affixed my official seal at the City
of Raleigh, this 11th day of April, 2022.

Elaine F. Marshall

Secretary of State



Scan to verify online.