# M22000006287

(Re	equestor's Name)			
(Ad	dress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL MAIL		
(Ви	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			

Office Use Only



200385219592

04/11/22--01049--013 \*\*160.00

PILED

2022 APR II PH 7: 08

SECRETAGE OF STATE

#### **COVER LETTER**

TO:

Registration Section

Div	vision of Corporations				
SUBJECT:	Hayward Realty Investment Group, LLC				
Name of Limited Liability Company					
		Company for Authorization to Transact Business in Florida, referenced foreign limited liability company to transact business.			
Please return	n all correspondence concerning this matter to	the following:			
	Tara Hayward Craig				
	Name of Person				
	Hayward Realty Investment Group, LLC				
	Firm/Company				
	533 Elmwood Pond Court				
	Address				
	Charlotte, NC 28214				
	Ci	ty/State and Zip Code			
	tcraig1913@gmail.com				
	E-mail address: (to be	used for future annual report notification)	2022		
For further in	nformation concerning this matter, please call	1: 27 1017 722 1017 723 1017	APR	77	
Tar	ra H Craig	407 733-1913	2022 APR 11 PM 7: 08		
	Name of Contact Person	Area Code Daytime Telephone Number	Мd	[N	
Mailing Address:		Street Address: Registration Section	7: 0		
Registration Section Division of Corporations		Division of Corporations	œ		
P.O. Box 6327 The Centre of Tallahassee		•			
	llahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Plea	closed is a check for the following amount: ase make check payable to: FLORIDA DEPA \$125.00 Filing Fee \$130.00 Filing Fee Certificate of	& ■ \$155.00 Filing Fee & □ \$160.00 Filing Fee,			

### 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. Hayward Realty Investi (Name of Foreign	ment Group, LLC Limited Liability Company; must include "Limite	d Liability Co	mpany," "L.L.C.," or "LLC.")		
	name adopted for the purpose of transacting business in F			ty Company," "L.L.C." or "LEC.")	
North Carolina  2. (Jurisdiction under the law of which foreign limited liability company is organized)		3	84-3247494 3		
4.		registration.) ine penalty liabi	lity)	_	
533 Elmwood Pond Co		533	Elmwood Pond Court		
5. (Street Address of Principal Office)		6	(Mailing Address)	<del></del>	
Charlotte, NC 28214		Ch:	arlotte, NC 28214		
_	ss of Florida registered agent: (P.O. Box Lorenzo Hayward	NOT acce	eptable)	2022 APR 11 SECRETARIAS	
Name: Office Address:	428 Courtlea Oaks Blvd		_	PH 7:	
	Winter Garden	·	34787 , Florida		
	(Cny)		(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.

(Hegistered 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:	□Manager	Name: Fara Hayward Gamble
■Member	Address: 533 Elmwood Pond Court	■Member	Address: 205 Otman Court
■Authorized	Charlotte, NC 28214	■Authorized	Rock Hill, SC 29732
Person		Person	
Other		□Other	Other
■Manager	Name:	□Manager	Name: Colleen Hayward
■Member	Address: 428 Courtlea Oaks Blvd	■Member	Address: 428 Courtlea Oaks Blvd
■Authorized	Winter Garden, FL 34787	■Authorized	Winter Garden, FL 34787
Person		Person	
Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Mcmber	Address:
□Authorized	·	□Authorized	
Person		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

LORENZD HALL AT A

Typed or printed name of signee



# 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

### HAYWARD REALTY INVESTMENT GROUP, LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 26th day of June, 2019

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.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 15th day of March, 2022.

Elaine J. Marshall

Secretary of State

Certification# 112539925-1 Reference# 18300603- Page: 1 of 1 Verify this certificate online at https://www.sosnc.gov/verification