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# Sunshine State Corporate Compliance Company

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### 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:

e unavailable, enter alternate i	name adopted for the purpose of transacting business in Flor	rida. The alternate name musi include "Limited Li	iability Company," "L.L.C," or "
corgia		3.	20
urisdiction under the law of w	hich foreign limited hability company is organized)	(FEI numb	per, if applicable
ine 24, 2022			JUN 24
	(Date first transacted business in Florida, if prior to re (See sections 605,0904 & 605,0905, F.S. to determin	egistration.) e penalty liability)	٠ ٨
42 Point Lane		6. (Mailing Address)	AN 8: OL
Address of Principal Office)		(Mailing Address)	<b>20 2</b>
aint Simons Island, C	eorgia 31522	Saint Simons Island, Georg	
ame and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)	
lame and street addres  Name:	ess of Florida registered agent: (P.O. Box Platinum Agent Services LLC	NOT acceptable)	2882
		NOT acceptable)	- JUL -
Name:	Platinum Agent Services LLC	32301	9
Name:	Platinum Agent Services LLC  155 OFFICE PLAZA DR		

(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 Capacit	<u>Name and Address:</u>
■Manager	Name: Robert Lancaster	□Manager	Name:
■Member	Address:	□Member	Address:
□Authorized	Saint Simons Island, Georgia 31522	□Authorized	
Person		Person	
□Other		□Other	Other
⊒Manager	Name:	□Manager	Name:
∃Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	□Other	□Other	Other
□Manager	Name:	□Manager	Name:
∃Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other

- isdiction 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.

1s1 Robert Lancaster	
Signature of an authorized person	
Robert Lancaster	
I sped or printed name of signer	

Control Number: 22132241

### STATE OF GEORGIA

### **Secretary of State**

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

#### CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

# Reaster, LLC a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business 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 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.

Docket Number : 23267465 Date Inc/Auth/Filed: 06/09/2022 Jurisdiction : Georgia Print Date : 06/24/2022

Form Number : 211



Brad Raffensperger

Brad Raffensperger Secretary of State