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	(Requestor's Name)
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PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
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2022 SEP 27 AM 11: 25 2022 SEP 27 AM 5: 30

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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 905071 8389471 AUTHORIZATION : COST LIMIT : ORDER DATE: August 24, 2022 ORDER TIME : 10:53 AM ORDER NO. : 905071-010 CUSTOMER NO: 8389471 FOREIGN FILINGS NAME: TWO SEVEN RENTALS, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER: ____

CONTACT PERSON: Alexxis Weiland -- EXT#

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:

f name unavailable, enter alternate name	adopted for the purpose of transacting business in Fl	orida, The altern	ate name must include "Limited Lin	bility Company,"	'L_L_C," o1	r "LLC."
Tennessee	85 3.	-1802928				
(Jurisdiction under the law of which	foreign limited liability company is organized)	(FEi number, if applicable)				
Upon Filing						
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine	registration.) ne penalty liabili	ty)	 ·		
Street Address of Principal Office)		6	(Mailing Address)			
			•			
1690 Hwy 79 S.		P.C). Box 5117	····		_
Paris, TX 38242		Sou	rth Fulton, TN 38257	₩ ,	20	
. Name and street address o	f Florida registered agent: (P.O. Box	NOT accep	otable)		22 SEP 2	
Name:	Corporation Service Company		_	<u>.</u>	7 AM	i.ED
Office Address: _	201 Hays Street		-	LORIDA Steat	چ <u>و</u> 30	
T	allahassee		32301			
_	(City)		, Florida (Zip code)			

(Registered agent's signature)

Ву:

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: __ Michael Tuner □Manager □ Manager 1690 Hwy 79 S. Address: _ **■**Member □ Member Address: _____ Paris, TN 38242 □Authorized ☐ Authorized Person Person Other Other □Other_ □Other___ □ Manager □Manager Name: _____ □Member Address: □Member Address: ☐ Authorized ☐ Authorized Person Person Other___ □Other____ □Other____ Other____ □Manager Name: □Manager Name: Address: □Member □Member 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. Nonindexed 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 anthorized person

Michael Turner

Typed or printed name of signee



Division of Business Services Department of State

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

CORPORATION SERVICE COMPANY

251 LITTLE FALLS DRIVE WILMINGTON, TN 19808

September 27, 2022

Request Type: Certificate of Existence/Authorization

Request #:

0496439

Issuance Date: 09/27/2022

Copies Requested:

Document Receipt

Receipt #: 007521530

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3836772710

\$20.00

Regarding:

Two Seven Rentals, LLC

Filing Type:

Limited Liability Company - Domestic

Formation/Qualification Date: 06/25/2020

Status:

Active

Duration Term:

Perpetual

Business County: HENRY COUNTY

Processed By: Cert Web User

Control #:

1106366

Date Formed:

06/25/2020

Formation Locale: TENNESSEE

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Two Seven Rentals, LLC

- * is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Verification #: 056289735