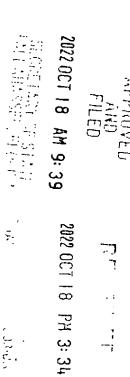
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(Requestor's Name)	
	Address)	
((Address)	
	City/State/Zip/Phone	#)
PICK-UP	₩AIT	MAIL
	_	
	(Business Entity Name	-
`	(,	,
	(Document Number)	
	,	
Certified Copies	Certificates	of Status
	-	
Special Instructions to	Filing Officer:	

Office Use Only



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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 10/18/2022		**WALK
ENTITY NAME MOVE	& STORE, LLC	
DOCUMENT NUMBER_		
	PLEASE FILE THE	ATTACHED AND RETURN
xxxxxxx	Plain Copy	
	Certified Copy	
	Certificate of Status	
** <u>*</u>	Certified Copy of Arts (
	Certificate of Good Stand	OTARIAL CERTIFICATION**
COUNTRY OF DESTINAT	•	
NUMBER OF CERTIFICA	TES REQUESTED	
TOTAL OWED \$ 125.00		ACCOUNT #: I20160000072
		ERTHO
Please call Tina at t	he above number for a	ny issues or concerns. Thank you so much!

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:

Move & Store, LLC				
(Name of Foreign	Limited Liability Company; must include "Limited	Liability Company," "L.L.C.,"	or "LLC.")	
f name unavailable, enter alternate	name adopted for the purpose of transacting business in Flo	orida. The alternate name must include	le "Limited Liability Company," "L.L.	.C," or "LLC."
Alabama		90-0749468 3.		
(Jurisdiction under the law of which foreign limited liability company is organ		(FEI number, if applicable)		
	(Date first transacted business in Florida, if prior to i (See sections 605.0904 & 605.0905, F.S. to determi	egistration) se penalty liability)		
130 Industrial Dr		130 Industrial Dr		
teet Address of Principal Office)		6. (Mailing Address)		
Birmingham, AL 3521	1	Birmingham, AL	35211	
Name and street address	ss of Florida registered agent: (P.O. Box	NOT_acceptable)	2022 OCT	,
Name:	NRAI Services, Inc.			后台
name.				() ()
Office Address:	1200 South Pine Island Rd		(i) 9: 3	١,
	Plantation		324	
	(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.

NRAI Services, Inc.

By:

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: Thomas Whitaker Mitchell	□Manager	Name: William Long Forbes III
■Member	Address: 130 Industrial Dr	■Member	Address:
□Authorized	Birmingham, AL 35211	□Authorized	Birmingham, AL 35211
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other		Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□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.

1. What Title
Signature of an authorized person

John H. Merrill Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Move & Store, LLC was formed in Jefferson County, Alabama on June 27, 2011. The Alabama Entity Identification number for this entity is 000-017856. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



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In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

10/18/2022

Date

X 2. Menill

John H. Merrill

Secretary of State