VV23000001754

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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S. FRANKLIN FEB 1 0 2023

COVER LETTER

WEAGLE III JBJECT:			_		
	Nam	e of Limited Liability Company	_		
e enclosed "Application l istence, and check are su	by Foreign Limited Liability bmitted to register the above	Company for Authorization to Transact Business in Florida referenced foreign limited liability company to transact bus	." Certific iness in F		
ease return all correspond	ence concerning this matter t	to the following:			
JACKIE	ELY				
	<u> </u>	Name of Person	_		
J ELY BI	JSINESS SERVICES INC.				
	<u> </u>	Firm/Company	_		
P.O. BO2	X 5618				
Address					
DESTIN	FL 32540		, ``		
City/State and Zip Code					
JACKIE@JELYDESTIN.COM					
	E-mail address: (to b	e used for future annual report notification)			
or further information con	cerning this matter, please ca	ail:			
JACKIE ELY		850 974-1595			
N	lame of Contact Person	at () Area Code Daytime Telephone Number	_		
Mailing Address:		Street Address:			
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			
T CHILD TO THE T		Tallahassee, FL 32303			

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

NEAGLE III LLC			<u> </u>		
(Name of Foreign)	Limited Elability Company, must include "Limited	d Liability Co	mpany," "L L,C.," or "LLC.")		
If name unavailable, enter alternate n	name adopted for the purpose of transacting business in Fl	orida The alter	nate name must include "Limited Liability Co	ompany," "L.L.C," or "LLC."	
ALABAMA		88-2452914			
(Jurisdiction under the law of which foreign limited liability company is organized)		3. (FEI number, if applicable)			
(Surface and and an area of the					
FEB 1 2023					
ł	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determ	registration.)	line)		
1590 East Nine Mile R		6.	93 Fairway Dr (Mailing Address)	<u> </u>	
5. Street Address of Principal Office)			(Mailing Address)	•••	
Pensacola, FL 325	14	Au	burn, Al. 36830	-	
	1	-		- !	
Name and <u>street addres</u>	ss of Florida registered agent: (P.O. Box	NOT acc	eptable)	· ·	
				_	
	Jacqueline Ely				
Name:		-			
as decreased in the	986 A Airport Rd				
Office Address:		<u> </u>			
	Destin		32541		
			. Florida		

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.

Gacqueline Cly
(Registed 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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name: Teresa Schier Name: Ronald A Schier ■Manager **≘**Manager 1693 Fairway Drive Address: ___ □Member □ Member Auburn, AL 36830 Auburn AL 36830 □ Authorized □ Authorized Person Person □Other____ □Other _____ □ Other______ □Other Name: _____Bacqueline Ely Name: ______ □ Manager □Manager Address: P.O. Box 5618 Address: _____ ☐ Member □ Member Destin FL 32540 □ Authorized ■Authorized Person Person Other__ □Other____ □Other_____ ☐Other_____ Name: _____ □Manager ■Manager Address: □Member Address: □Member □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. Jacqueline Ely
Signature of an Antonized person

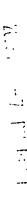
Typed or printed name of signee

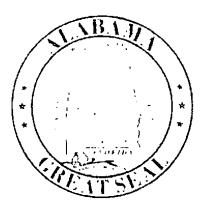
Jacqueline Ely

STATE OF ALABAMA

I, Wes Allen, 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 WEAGLE III, LLC was formed in Alabama, Alabama on May 23, 2022. The Alabama Entity Identification number for this entity is 001-021522. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.





20230130000020254

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.

01/30/2023

Date

Wes Allen

Secretary of State



January 27, 2023

JACKIE ELY P O BOX 5618 DESTIN, FL 32540 US

SUBJECT: WEAGLE III LLC Ref. Number: W23000010550

We have received your document for WEAGLE III 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.

Sharon D Franklin Regulatory Specialist II

RECEIVED
FEB 0 7 2023

PASSE LET ALSO

Letter Number: 923A00002102