

M23000002909

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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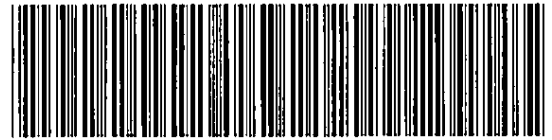
(Business Entity Name)

(Document Number)

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K. Brumblay

FILE 2ND

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 420917 8331191

AUTHORIZATION :

COST LIMIT : \$ 125,000

ORDER DATE : January 30, 2023

ORDER TIME : 1:33 PM

ORDER NO. : 420917-100

CUSTOMER NO: 8331191

FOREIGN FILINGS

NAME: P.J. ROBB VARIABLE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: \_\_\_\_\_

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. P.J. Robb Variable, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Tennessee 3. 62-1592808  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. Upon filing  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. Suite 400 6075 Poplar Avenue 6. c/o Hasana Stanberry, Truist 214 N Tryon St  
(Street Address of Principal Office) (Mailing Address)  
Memphis, TN 38119 Charlotte, NC 28202-1078

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company  
Office Address: 1201 Hays Street  
Tallahassee, Florida 32301  
(City) (Zip code)

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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.

Corporation Service Company  
By: [Signature]  
(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:  
☒ Manager      Name: Robert Carney  
☐ Member      Address: 6075 Poplar Avenue  
☐ Authorized      Suite 400  
Person      Memphis, TN 38119  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

Title or Capacity:                      Name and Address:  
☒ Manager      Name: Bruce Harrison  
☐ Member      Address: 6075 Poplar Avenue  
☐ Authorized      Suite 400  
Person      Memphis, TN 38119  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☒ Manager      Name: John M. Howard  
☐ Member      Address: 6075 Poplar Avenue  
☐ Authorized      Suite 400  
Person      Memphis, TN 38119  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☒ Manager      Name: Jennifer A. Matlock  
☐ Member      Address: 6075 Poplar Avenue  
☐ Authorized      Suite 400  
Person      Memphis, TN 38119  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

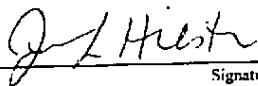
☒ Manager      Name: John Schuyler  
☐ Member      Address: 6075 Poplar Avenue  
☐ Authorized      Suite 400  
Person      Memphis, TN 38119  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager      Name: \_\_\_\_\_  
☐ Member      Address: \_\_\_\_\_  
☐ Authorized      \_\_\_\_\_  
Person      \_\_\_\_\_  
☐ 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

Jennifer Hiester

Typed or printed name of signer



**Tre Hargett**  
Secretary of State

**Division of Business Services**  
**Department of State**

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

**ERICA S TARRANT-WILSON**  
251 LITTLE FALLS DRIVE  
WILMINGTON, DE 19808

February 9, 2023

**Request Type: Certificate of Existence/Authorization**  
Request #: 0515573

Issuance Date: 02/09/2023  
Copies Requested: 1

**Document Receipt**

Receipt #: 007793907 Filing Fee: \$20.00  
Payment-Credit Card - State Payment Center - CC #: 3844994385 \$20.00

**Regarding: P.J. Robb Variable, LLC**  
Filing Type: Limited Liability Company - Domestic Control #: 290865  
Formation/Qualification Date: 02/21/1995 Date Formed: 02/21/1995  
Status: Active Formation Locale: TENNESSEE  
Duration Term: Perpetual Inactive Date:  
Business County: SHELBY COUNTY

**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

**P.J. Robb Variable, 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.

Tre Hargett  
Secretary of State

Processed By: Cert Web User

**Verification #: 058796935**