

M23000004430

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

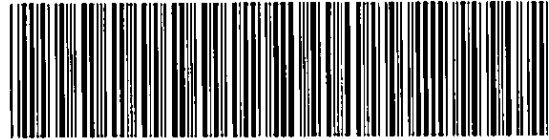
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W23000046396

Office Use Only



800404413568

03/13/23--01020--007 \*\*130.00

2023-03-13 PM 2:20

S. ROBERTS

APR - 6 2023

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Nerano, LLC  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Terence C. Russell  
Name of Person  
FrontDoor Communities, LLC  
Firm/Company  
P. O. Box 930  
Address  
Roswell, GA 30077  
City/State and Zip Code  
pneumann@fdcommunities.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patti Neumann 404 992-7934  
Name of Contact Person at Area Code Daytime Telephone Number

Mailing Address:  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: FLORIDA DEPARTMENT OF STATE

☐ \$125.00 Filing Fee    ☒ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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. Nerano, 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. Georgia 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 5000 Rosedown Place 6. P. O. Box 930  
(Street Address of Principal Office) (Mailing Address)  
Roswell, GA 30076 Roswell, GA 30077

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

Name: William Fox  
Office Address: 16467 Veterans Memorial Boulevard  
Naples, Florida 34110  
(City) (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.

  
(Registered agent's signature)

2023-10-10 10:11:23:20

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]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: Terence C. Russell	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: P. O. Box 930	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	Roswell, GA 30077	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> 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.

Terence C. Russell  
 Signature of 1st authorized person.

Terence C. Russell  
 \_\_\_\_\_  
 Type or printed name of signer

# 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

**Nerano, 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 : 24683182  
Date Inc/Auth/Filed: 07/06/2022  
Jurisdiction : Georgia  
Print Date : 03/06/2023  
Form Number : 211



*Brad Raffensperger*

Brad Raffensperger  
Secretary of State

AFFIDAVIT TO RELEASE NAME FROM USE

WHEREAS, on September 19, 2022, Nerano, LLC, (the "FL LLC") was organized in the State of Florida and assigned Document Number L22500-107521 by the Florida Division of Corporations,

WHEREAS, Articles of Dissolution for the FL LLC were submitted electronically for filing to the Florida Division of Corporations on March 8, 2023;

WHEREAS, Nerano, LLC was organized in the State of Georgia on July 26, 2022 (the "GA LLC");

WHEREAS, simultaneously with this Affidavit, an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida (the "Application") for the GA LLC was submitted to the Florida Division of Corporations for filing;

WHEREAS, the FL LLC and GA LLC have the same name (except for a period which appears at the end of the FL LLC name);

NOW THEREFORE, personally appeared before me, the undersigned Terence C. Russell (the "Deponent"), who, being duly sworn, deposes and says as follows:

1. THAT, I am the Manager of the FL LLC and the Manager of the GA LLC. I am of legal age under no legal disability and make this Affidavit based upon my personal knowledge, authorize its use for any and all purposes allowed by Florida law, and have the authority to enter into and make this Affidavit;

2. To Deponent's knowledge, the recitals set forth above are true and accurate; and,

3. THAT, upon the filing of this Affidavit with the Florida Division of Corporations, I direct the Florida Division of Corporations to immediately release the name "Nerano, LLC," from use in the State of Florida, and file the Application (for the GA LLC).

This Affidavit is made this 17th day of March, 2023.

DEPONENT:

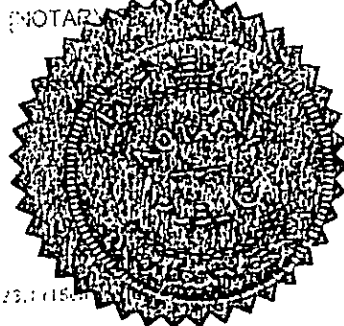
Terence C. Russell (SEAL)  
Terence C. Russell

Sworn to and subscribed to before me this  
day of March 8, 2023.

Nicole Miller  
Witness

Patti Neumann  
Notary Public

My Commission Expires: 7/26/2026



PATTI NEUMANN  
NOTARY PUBLIC  
Fulton County  
State of Georgia  
My Comm. Expires July 26, 2026