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P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 10/09/2023

NAME: ALLEN & COMPANY, LLC

TYPE OF FILING: APPLICATION

COST: 125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: Allen & Company, 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:
Emily Webster
Name of Person
Centerline Business Services
Firm/Company
813 Ridge Lake Blvd.
Address
Memphis, TN 38120
City/State and Zip Code
ewebster@centerlinebs.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Type text here
Emily Webster at (901) 259-8263
Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE
\$125.00 Filing Fee \$\sum \text{S130.00 Filing Fee & Gertificate of Status}\$\$ Certificate 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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Allen & Company	, LLC Limited Liability Company; must include "Limite	d Liabilit	y Company," "L.L.C." or "L	LC.")			-
Allen of TN, LLC							
(If name unavailable, enter alternate r	same adopted for the purpose of transacting business in Flo	rida. The a	ternate name must include "Limit	ed Liability C	ompany," "L.L.	C," or "I	Īc.")
2. Tennessee (Jurisdiction under the law of which foreign limited liability company is organized) 3		92-3931591					
Contraction made are tan Of w	men toreign intuited matting company is organized)		(FE	Inumber, if a	pplicable)		
4							
	(Date first transacted business in Florida, if prior to a (See sections 605 0904 & 605,0905, F.S. to determine	registration ne penalty) liability)		_		
5. 16 E. Plant Stree	Principal Office)	6.	813 Ridge Lake	Blvd. g Address)		<u></u>	
Winter Garden, F	L 34787		Memphis, TN 38	120			_
7. Name and <u>street addres</u>	s of Florida registered agent: (P.O. Box	<u>NOT</u> a	cccptable)			2023 OCT -9	- 71E
Name:	Paracorp Incorporated						- BOA
Office Address:	155 Office Plaza Drive, 1st Floo	r			1.5	9: 49	Œ
	Tallahassee		, Florida3230)1			
	(City)		(2)	p code)	-		
designated in this applicat to comply with the provisi	tance: gistered agent and to accept service of p tion, I hereby accept the appointment as ons of all statutes relative to the proper of tof my position as registered agent.	registe	red agent and agree to	act in thi	s capacity.	I fur	ther norse
	Please see attache	d.					
	(Registered agent's si	gnature)			•		

Title or Capacity:	Name and Address:	<u>Title or Capacity:</u>	Name and Address:			
Manager	Name: Fremont Wright	✓ Manager	Name: Jeffrey B. Presley			
✓Member	Address: 813 Ridge Lake Blvd.	☐ Member	Address: 813 Ridge Lake Blvd.			
Authorized	Memphis, TN 38120	Authorized	Memphis, TN 38120			
Person		Person				
Other		Other	Other			
Manager	Name:		Name:			
☐ Memb e r	Address:	Member	Address:			
Authorized		Authorized				
Person		Person				
Other	Other	Other	Other			
☐Manager	Name:	Manager	Name:			
Member	Address:	☐ Member	Address:			
Authorized		☐ Authorized				
Person		Person				
Other	Other	Other	Other			
9. Attached is a certifurisdiction under the of the translator mus10. This document is	se an attachment to report more than six (6). It may be added to the index when filing your Fl ficate of existence, no more than 90 days old, the law of which it is organized. (If the certificate to be submitted) is executed in accordance with section 605.020 ment to the Department of State constitutes a the submitted of the Department of State constitutes at the submitted of the Department of State constitutes at the submitted of the Department of State constitutes at the submitted of the Department of State constitutes at the submitted of the Department of State constitutes at the submitted of the Department of State constitutes at the submitted of the submit	lorida Department of State duly authenticated by the often is in a foreign language, (3 (1) (b), Florida Statutes, lind degree felony as providing the statutes of the statute	Annual Report form. official having custody of records in the a translation of the certificate under oath			

Typed or printed name of signee

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 10/6/2023

ENTITY NAME: Allen of TN, LLC

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tailahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

L'Herrera



Division of Business Services Department of State

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

PARASEC

Request #:

2804 GATEWAY OAKS DR STE 100 SACRAMENTO, CA 95833

October 6, 2023

Request Type: Certificate of Existence/Authorization

0550527

Issuance Date: 10/06/2023

Copies Requested:

Document Receipt

Receipt #: 008400926

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3859397201

\$20.00

Regarding:

Allen & Company, LLC

Filing Type:

Status:

Limited Liability Company - Domestic

Formation/Qualification Date: 05/08/2023

Active

Duration Term: Perpetual

Business County: SHELBY COUNTY

Control #:

1424402

Date Formed:

05/08/2023

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

Allen & Company, 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 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

Processed By: Cert Web User Verification #: 063261826