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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338

Fax Number : (614)573-3996

#Enter the email address for this business entity to be used for future

Email Address: mclark@mmgmgt.com

## Foreign Limited Liability Company MMG MANAGEMENT LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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Help

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

IN COMPLIANCE WITH SECTION 6050002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANYTOTRANSACT BUSINESS INTUE STATE OF FLORIDA-

	,,	HIGH THE	alternate name must include "Lamated Laability Compan	y. L.C.C. OF THE
GEORGIA		3.	(FEI number, if applicable	
(Jurisdiction juster the law of w	high foreign limited hability company is organized)		(FEI number, if applicable	3
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determi	registration	lability)	
5290 Mait Hwy, Ste 50	02-198		5290 Mait Hwy, Sie 502-198	
cet Address of Principal Office)	<del> </del>	6.	(Mailing Address)	<del></del>
Cumming, GA 30028			Cumming, GA 30028	2
Norma and streat address	ss of Florida registered agent: (P.O. Box	NOT	accuntable)	£
ivame and <u>succe addres</u>	son i fortua registerett agent. (1.10. 100x	.301	ice plane,	j
Name:	C T Corporation System			24 MAY IL FR
Office Address:	1200 South Pine Island Road			
	Plantation		33324, Florida	
	(Cir.)		(Zip zode)	

	C T Corporation System	
By:		
	(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
ma	mage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
■Manager	Name: Mike Furr	<b>■</b> Manager	Name: Bryan Brinson
□Member	Address: 5290 Matt Hwy, Ste 502-198	☐ Member	Address: 5290 Matt Hwy. Stc 502-198
□Authorized	Cumming, GA 30028	☐ Authorized	Cumming, GA 30028
Person		Person	
□Other	□ Other	ZOther	□Other
□Manager	Name:	∏Manager	Name:
□Member	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	

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.

Michelle Clark	
Signature of an authorized person	
Michelle Clark	
Typed or printed name of signee	

Control Number: 10035128

# 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

### MMG MANAGEMENT, LLC.

à Domestie Limited Liability Companys

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 : 27301515 Date Ine/Auth/Filed: 05/14/2010 Jurisdiction : Georgia Print Date : 05/10/2024 Form Number : 211



Brad Raffensper

Brad Raffensperger Secretary of State