M24000007291

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(Čity	/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
/Que	iness Entity Name)	
1005	iness chity Name;	
·		
(Doc	cument Number)	
Certified Copies	Certificates of	of Status
Special Instructions to Filing	g Officer:	-

Office Use Only



900431019649

2021 JULY -7 FH 5: 16

RECEIVED

jun 0 5 2924 K Brumbley CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 376824 8327652
AUTHORIZATION : Carrie Central
COST LIMIT : \$ 125
ORDER DATE: March 25, 2024
ORDER TIME : 9:14 AM
ORDER NO. : 376824-030
CUSTOMER NO: 8327652
FOREIGN FILINGS
NAME: HANNLEB ENTERPRISES LLC
XXXX QUALIFICATION (TYPE: <u>LL</u>)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Shauna Godbolt -- EXT#

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 BY SINESS IN THE STATE OF FLORIDA:

	ame adopted for the purpose of transacting business in Flor	rida. The alternate name must include "Limited Liabil	ity Company," "L.L.C," or "LLC	
₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩ ₩		87-4592613		
		3(FEI number,	(FEI number, if applicable)	
	(Date first transacted business in Florida, if prior to re	gistration.)		
	(Date first transacted business in Florida, if prior to re (See sections 605 0904 & 605 0905, F.S. to determin			
200 Queens Rd. Suite 400			200 Queens Rd. Suite 400 (Mailing Address)	
cei Address of Principal Office)		(Mailing Address)		
Charlotte NC 28204		Charlotte NC 28204		
	s of Florida registered agent: (P.O. Box Corporation Service Company	NOT acceptable)	2024 JUT - 7	
Name: Office Address:	1201 Hays Street		78 25 45	
	Tallahassee	32301 , Florida	_	
	(City)	(Zip code)		

Shauna Godbolt (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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name: KELLY HALEY Name: DAVID CAMERON □Manager □ Manager 200 QUEENS ROAD 200 QUEENS ROAD Address: Address: ☐Member **■** Member SUITE 400 SUITE 400 Authorized □ Authorized CHARLOTTE NC 28204 CHARLOTTE NC 28204 Person Person ■Other CEO ☐Other____ Other____ □Other Name: _____ □Manager Name: _____ □Manager Address: □Member ☐ Mcmber Address: _____ □ Authorized □ Authorized Person Person Other____ ☐ Other Other___ □Other Name: _____ □Manager □Manager Address: ____ Address: ______ ☐ Member □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.

Signature of an authorized person

376824-30

DAVID CAMERON



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

----HANNLEB ENTERPRISES LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 13th day of December, 2021

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger, or articles of conversion for said limited liability company.





Scan to verify online,

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 7th day of May, 2024.

Elaine I Marshall

Secretary of State