M24000007479

| (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: |
| |
| |
| |
| |
| |

Office Use Only



200430644822

200430044822 06/13/24--01007--002 **155.00

7024 J.:: 12 P.1 4: C2

JUN 1 2 2024 K. Brumbley To: FL Department of State: Division of Corporations

May 14, 2024

From: Alisha Haskell

625 Molly Lane STE 100

Woodstock, GA 30189

RE: Subject: NPSG Development, LLC

EIN: 82-3963175

Ref. Number: L20000055397

To whom this may concern,

We recently sent in an amendment for our name change from NPSG Development, LLC to NPSG Built, LLC. In the process of doing this, it was brought to my attention that we were filed as a FL LLC instead of a Foreign LLC.

I was then instructed to dissolve the FL LLC and re-register as a Foreign LLC. Attached is the new registration with the new name, the old reference document, the dissolution paperwork, as well as the \$155.00 check for the filing fees.

Please let me know if you have any questions.

Alisha Haskell

316-390-1150

ahaskell@npsgdev.com

COVER LETTER

TO:

| 10: | Registration Section Division of Corporations | |
|-------------------|---|---|
| | | NPSG Built, LLC |
| SUBJI | RCT: | Name of Limited Liability Company |
| The en Exister | nclosed "Application by Foreign Limited Lia nce, and check are submitted to register the a | bility Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florida |
| Please | return all correspondence concerning this in | atter to the following: |
| | | Alisha Haskell |
| | | Name of Person |
| | | NPSG Built, LLC |
| | | Firm/Company |
| | | 625 Molly Lane STE 100 |
| | <u> </u> | Address |
| | | Woodstock, GA 30189 |
| | | City/State and Zip Code |
| | | licensing@npsgdev.com |
| | E-mail address | : (to be used for future annual report notification) |
| For fu | rther information concerning this matter, ple | ase call: |
| | Alisha Haskell | 316 390-1150 at() |
| | Name of Contact Person | at () Area Code Daytime Telephone Number |
| | Mailing Address: Registration Section Division of Corporations P.O. Box 6327 | Street Address: Registration Section Division of Corporations The Centre of Tallahassee |
| | Tallahassee, FL 32314 | 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 |
| | Enclosed is a check for the following ame Please make check payable to: FLORID. \$125.00 Filing Fee \$130.00 File Certi | A DEPARTMENT OF STATE |

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

IN COMPILANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

| | name adopted for the purpose of transacting business in Flor | | woniny Company," "L.i.C," or "I | "L(|
|---|---|-----------------------------------|---------------------------------|-----|
| Georgia | | EIN: 82-3963175 3. | | |
| (Jurisdiction under the law of w | hich foreign limited liability company is organized) | (FE) numb | er, if applicable) | - |
| | | | | |
| | (Date link transacted business in Florids, if prior in re (See sections 605.0904 & 605.0905, F.S. to decermin | gistration.) consity inbility) | | |
| 625 Molly Lane | | 625 Molly Lane | | |
| ter Address of Principal Office) | | 6. (Mailing Address) | | - |
| STE 100 | | STE 100 | | |
| Woodstock, GA 30189 | | Woodstock, GA 30189 | | • |
| | e and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) C T Corporation System Name: | <u>NOT</u> acceptable) | 924 JUNI 12 | |
| Office Address: | 1200 South Pine Island Road | | 19 11 4: | |
| | Plantation | , Florida(Zip code) | 20 | |
| | (Cuy) | (Zip code) | | |
| signated in this applica comply with the provisi | tance: gistered agent and to accept service of pr tion, I hereby accept the appointment as ons of all statutes relative to the proper a s of my position as registered agent. | registered agent and agree to act | in this capacity. I furti | he |
| | C T Corporation System () | Linda Stauffer Assistant Secreta | ary | |

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: Robert Beams Fantana Industries, LLC ■ Manager 625 Molly Lane 1850 Parkway Place ■ Member **■**Member **STE 100** STE 500 □ Authorized □ Authorized Woodstock, GA 30189 Marietta, GA 30067 Person Person Other____ □Other_ ☐ Other____ ☐Other_ Name: Eric Obrokta William T Selby Name: ■Manager **■**Manager 1850 Parkway Place 1850 Parkway Place □Member Address: □Member **STE 500** STE 500 ☐ Authorized □ Authorized Marietta, GA 30067 Marietta, GA 30067 Person Person □ Other____ □ Other_____ Other_ ☐ Other_ Name: 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. Rob Beams (May 14, 2024 08 42 FDT) Signature of an authorized person Robert Beams

Typed or printed name of signoo

Control Number: 17131597

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

l, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

NPSG Built, 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 : 27032439 Date Inc/Auth/Filed: 12/15/2017 Jurisdiction : Georgia Print Date : 03/25/2024

Form Number : 211



Brad Raffenspager

Brad Raffensperger Secretary of State