# M24000010928

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#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT:	TG ACQUISITION LLC						
Name of Limited Liability Company							
The enclosed Existence, an	"Application by Foreign Limited ld check are submitted to register the	Liability Company for Authorization to Transact Business in Florida." Certificate of se above referenced foreign limited liability company to transact business in Florida.					
Please return	all correspondence concerning this	matter to the following:					
	JOANNE MAURICIO						
	Name of Person						
	TG ACQUISITION LLC						
	<del></del>	Firm/Company					
	6600 BAY CIRCLE						
	Address						
	PEACHTREE CORNERS, GA 30071						
		City/State and Zip Code					
	JOANNE@CGPCONNECT.CO	DM					
	E-mail addre	ss: (to be used for future annual report notification)					
For further in	formation concerning this matter, p	please call:					
JOANNE MAURICIO		770 729-1145 at ()					
	Name of Contact Pers	on 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					
Pleas	125.00 Filing Fee 💢 \$130.00 I	DA DEPARTMENT OF STATE					

\* PLEASE FIND A COPY of THE DRIGINAL CHECK MAILED and a COPY OF THE REJECTION LETTER.

# 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:

	name adopted for the purpose of transacting business in Flori	da. The alternate name must include "Limite	d Liability Compai	ny," "L.L.C," or	· "LLC.
GEORGIA		99-1746104			
(Jurisdiction under the faw of w	which foreign limited liability company is organized)	3. (FEI number, it applicable)			
N/A					
	(Dec. Section 1)		<del></del>		
	(Date lirst transacted business in Florida, if prior to reg (See sections 605,0904 & 605,0905, F.S. to determine	penalty hability)			
6600 BAY CIRCLE		6600 BAY CIRCLE			
reet Address of Principal Office)		6. (Mailing Address)			
PEACHTREE CORNERS, GA 30071		PEACHTREE CORNER	S GA 30071		
	<del></del>				_
<del></del>		·	<del></del>		_ ,
Mana and atmost address	on of Florida or vistored across (D.O. Dec.)	MOT 11 )	:	ंडी ्डी	
Name and Street address	ss of Florida registered agent: (P.O. Box )	NOT acceptable)		: .:	
	ANDROWNORTH				•
Name:	ANDREW NORTH		Ċ	. 1	
	4221 ROLLING OAK DRIVE		:		
Office Address:				::- 대	
	LAKELAND\	33801-12	1 286		
		. Florida(Zip code			
	(City)				

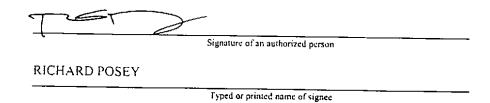
(Registered agent's signature)

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]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
■Manager	Name: DAVE CARLEY	■Manager	Name: PAUL PARKER
□Member	Address: 2950 Mt. Wiłkinson Pkwy, SE	□Member	Address: 4235 IRON DUKE CT.
□Authorized	ATLANTA, GA 30336	□Authorized	PEACHTREE CORNERS, GA 30097
Person		Person	
□Other	Other	□Other	Other
■Manager	Name: RICHARD POSEY	■Manager	Name:
□Member	Address:	□Member	Address:
□Authorized	3038 PRESTWYCK HAVEN DR.	□Authorized	4235 BADEN ALY
Person	DULUTH, GA 30097	Person	DULUTH, GA 30097
Other	Other	Other	· · · · · · · · · · · · · · · · · · ·
■Manager	Name: ANDREW NORTH	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized	4 AJELLOS FARM ROAD	□Authorized	
Person	SEYMOUR, CT 06483	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. 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.



Control Number: 24024683

## 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

> TG Acquisition, 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 . 27835720 Date Inc/Auth/Filed: 01/26/2024 Jurisdiction Georgia Print Date 08/21/2024

Form Number . 211



Bred Raffensperger

Brad Raffensperger Secretary of State