

M24000012296

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

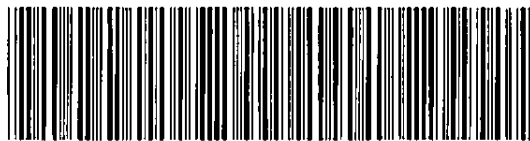
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

W24-71014

Office Use Only



600427381656

09/17/24--01017--004 **638.75

09/18/24--01024--021 **155.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
24 SEP 25 AM 11:48

MS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 7, 2024

RACHEL H. BROCK
3461 HWY 72
HOLLY SPRINGS, MS 38635 US

SUBJECT: B & H FAMILY AFFAIR LLC
Ref. Number: W24000071014

We have received your document for B & H FAMILY AFFAIR LLC and check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$638.75.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Ariel Jones
Regulatory Specialist II

Letter Number: 324A00009930

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: B+H Family Affair 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:

Rachel H. Brock
Name of Person

Firm/Company

3461 Hwy 72
Address

Holly Springs MS 38635
City/State and Zip Code

rrbrock98@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rachel Brock at (662) 274-5077
Name of Contact Person 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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☒ \$155.00 Filing Fee & Certified 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
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. B + H Family Affair LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. MS 3. 92-1552789
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. May 11, 2023
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3461 Hwy 72
(Street Address of Principal Office)
Holly Springs MS 38635

6. 3461 Hwy 72
(Mailing Address)
Holly Springs MS 38635

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

GARY BOWMAN

Office Address:

9306 EMERALD COAST PRWY

MIRAMAR BEACH

(City)

, Florida

32550

(Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Gary Bowman
(Registered agent's signature)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
24 SEP 2023
AM 11:40

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:**

☒ Manager Name: Rachel H. Brock

☐ Member Address: 3461 Hwy 72

☐ Authorized Holly Springs MS 38635

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☐ Manager Name: Randall G. Brock

☒ Member Address: 3461 Hwy 72

☐ Authorized Holly Springs MS 38635

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Edwin Paul Hurdle

☒ Member Address: 3471 Hwy 72

☐ Authorized Holly Springs MS 38635

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Bobbie Nell Hurdle

☒ Member Address: 3471 Hwy 72

☐ Authorized Holly Springs MS 38635

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

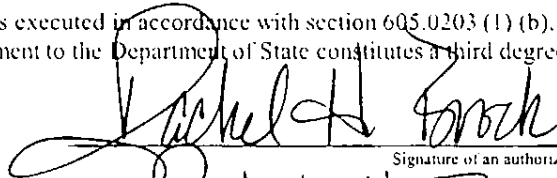
Person _____

☐ 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.



Signature of an authorized person

Rachel H. Brock

Typed or printed name of signee



Michael Watson
SECRETARY OF STATE

Office of the Secretary of State
Jackson, Mississippi

Certificate of Good Standing

I, MICHAEL WATSON, Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify:

B & H FAMILY AFFAIR LLC

Registered the 4th day of January, 2023

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

3461 HIGHWAY 72
HOLLY SPRINGS, MS 38635

And that the registered agent at that address is:

Rachel Brock

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office, and that said Limited Liability Company is in good standing to do business in Mississippi at this time.

Given under my hand and seal of office
the 9th day of April, 2024

A handwritten signature in black ink that reads "Michael Watson".

Certificate Number: CN24186551

Verify this certificate online at <http://corp.sos.ms.gov/corpcnv/verifycertificate.aspx>