

M24000014966

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

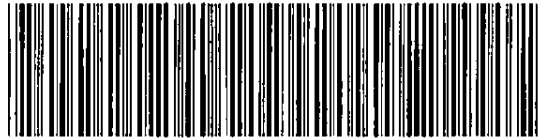
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W24000143018  
W24000130131

Office Use Only



400435721024

400435721024  
11/04/24--01015--003 \*\*377.50

09/05/24--01025--006 \*\*525.00

2024 NOV - 1 PM 8:30



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 18, 2024

BRIAN AUSTIN  
11071 MIRADOR LN  
FISHERS, IN 46037 US

SUBJECT: AUSTIN & AUSTIN PROPERTIES, LLC  
Ref. Number: W24000143018

We have received your document for AUSTIN & AUSTIN PROPERTIES, LLC and your check(s) totaling \$525.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the check you sent wasn't enough. You still owe \$377.50 if in fact you did start your business in Florida in April of 2022. After we receive this check, we can move forward.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Andrea Andrews  
Regulatory Specialist II

Letter Number: 324A00023107

**RECEIVED**

NOV 01 2024

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Austin + Austin Properties, 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:

Brian Austin  
Name of Person  
Austin + Austin Properties, LLC  
Firm/Company  
11071 Mirador Ln  
Address  
Fishers IN 46037  
City/State and Zip Code  
bausti25@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brian Austin at ( 317 ) 590-9564  
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

↖  
+ \$400 late filing fee  
1st page says \$138.75 but that's not listed here

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. Austin + Austin Properties 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. State of IN  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. EIN 87-3186280  
(EIN number, if applicable)

4. April 2022  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 11071 Mirador Ln  
(Street Address of Principal Office)

6. 11071 Mirador Ln  
(Mailing Address)

Fishers IN 46037

Fishers IN 46037

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

Name: Brian Austin

Office Address: 647 Patina Blvd

Inlet Beach, FL . Florida 32461  
(City) (Zip code)

2024 NOV - 1 PM 8:30

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.

[Signature]  
(Registered agent's signature)

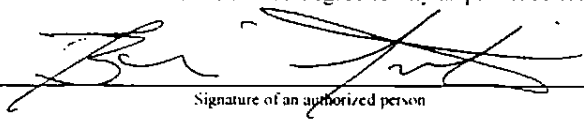
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>Lelia Austin</u>	<input type="checkbox"/> Manager	Name: _____
<input checked="" type="checkbox"/> Member	Address: <u>11071 Mirador Ln</u>	<input type="checkbox"/> Member	Address: _____
<input checked="" type="checkbox"/> Authorized	<u>Fishers, IN 46037</u>	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: <u>Karen Clark</u>	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: <u>Panhandle Getaways</u>	<input type="checkbox"/> Member	Address: _____
<input checked="" type="checkbox"/> Authorized	<u>30A Destin Ops Mgr</u>	<input type="checkbox"/> Authorized	_____
Person	<u>17616 Front Beach Rd</u>	Person	_____
<input checked="" type="checkbox"/> Other _____	<u>Panama City, FL 32413</u>	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: <u>Brian Austin</u>	<input type="checkbox"/> Manager	Name: _____
<input checked="" type="checkbox"/> Member	Address: <u>11071 Mirador Ln</u>	<input type="checkbox"/> Member	Address: _____
<input checked="" type="checkbox"/> Authorized	<u>Fishers IN 46037</u>	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> 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  
  
Brian Austin  
\_\_\_\_\_  
Typed or printed name of signer

**State of Indiana**  
**Office of the Secretary of State**

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, DIEGO MORALES, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

**AUSTIN & AUSTIN PROPERTIES, LLC**

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on October 19, 2021, and was in existence or authorized to transact business in the State of Indiana on October 09, 2024.

I further certify this Domestic Limited Liability Company has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, October 09, 2024

*Diego Morales*

DIEGO MORALES  
SECRETARY OF STATE

202110191535305 / 20244014072

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on November 08, 2024.