M25000000 333

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

Office Use Only



300440717333

12/09/24--01009--019 **125.00





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the instructions to register a foreign limited liability company to transact business in Florida. The requirements are as follows:

Pursuant to s. 605,0902, Florida Statutes, the attached application must be completed in its entirety.

The foreign limited liability company must submit 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.

- The name of a limited liability company must be distinguishable on the records of the Florida Department of State. If the name of your limited liability company is not distinguishable on our records, you must adopt an alternative name to use in the state of Florida.
- The name of a limited liability company in the state of Florida must contain the words "Limited Liability Company." The abbreviation "L.L.C.," or the designation "L.L.C."

A preliminary search for name availability can be made on the Internet through the Division's records at www.sunbiz.org. Preliminary name searches and name reservations are no longer available from the Division of Corporations. You are responsible for any name infringement that may result from your name selection.

The fees to register are as follows:

S	100.00	Filing Fee for Application
\$	25.00	Designation of Registered Agent
S	30.00	Certified Copy (optional)
S	5.00	Certificate of Status (optional)

Emportant Information About the Requirement to File an Annual Report

All Foreign Limited Liability Companies must file an Annual Report yearly to maintain "active" status. The first report is due in the year following formation. The report must be filed electronically online between January 1st and May 1st. The fee for the annual report is \$138.75. After May 1st a \$400 late fee is added to the annual report filing fee. "Annual Report Reminder Notices" are sent to the e-mail address you provide us when you submit this document for filing. To file any time after January 1st, go to our website at www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st

A letter of acknowledgment will be issued free of charge upon registration. Please submit one check made payable to the Florida Department of State for the total amount of the filing fee and any optional certificate or copy.

A COVER letter should be submitted along with the application, certificate, and check. The mailing address and courier address are noted below.

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051.

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

COVER LETTER

TO:

Registration Section

JECT: Name of Limited Liability Company						
osed "Application by Foreign Limited Liability e, and check are submitted to register the above	Company for Authorization to Transact Business in Florida." Certification referenced foreign limited liability company to transact business in					
turn all correspondence concerning this matter t	to the following:					
Peter Renner Corry Jr.						
	Name of Person					
PECO Ventures, LLC						
	Firm/Company					
3495 Piedmont Rd. Building 11, Suite	900					
	Address					
Atlanta, GA 30305						
C	ity/State and Zip Code					
peter@corrygroup.com						
E-mail address: (to be	e used for future annual report notification)					
er information concerning this matter, please ca	II:					
Peter Renner Corry Jr.	205 213 3227 at ()					
Name of Contact Person	at () Daytime Telephone Number					
Mailing Address: Registration Section	Street Address: Registration Section					
Division of Corporations P.O. Box 6327	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 amount:						

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:

f name unavailable, enter alternate i	name adopted for the purpose of transacting business in Flo	orida. The alterna	te name must include "Limited L	ability Company," "L.L.C.	" or "LLC	
Georgia			1277264			
(Jurisdiction under the law of w	hich foreign limited liability company is organized;	J	(FEI number, if applicable)			
N/A						
	(Date first transacted husiness in Florida, if prior to (See sections 605 0903 & 605 0905; F.S. to determi		vi			
3495 Piedmont Rd.			Piedmont Rd.			
reet Address of Principal Office)		6	(Mailing Address)			
Building 11, Suite 900		Buil	ding 11, Suite 900			
Atlanta, GA 30305		Atla	nta, GA 30305			
Name and street address	ss of Florida registered agent: (P.O. Box	NOT accep	table)	2021 Sign		
Name:	Blake Davis		_	2024 DEC -9 \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
Office Address:	11800 Scaview Dr.		_	11.93555. 71.5.35.35. 11.11.11	2 g	
	Vero Beach		32963 , Florida	11: 5 5	ڏ.	
	(City)		(Zip code)			

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.

(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: Name: Peter Renner Corry Jr. □Manager □Manager Name: _____ Address: 3495 Piedmont Rd. Address: □ Member Building 11, Suite 900 □ Authorized □ Authorized Atlanta, GA 30305 Person Person **■**Other AMBR □Other____ □Other_____ □Other____ □ Manager Name: Name: _____ Address: _____ ☐ Member Address: _____ □Member \square Authorized □ Authorized Person Person □Other ___ □Other_____ □ Other □Other______ Namet □Manager Name: ______ □ Member Address: ______ □ Member Address: ______ □ 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 605,0203-41700. Florida Statutes. I am aware that any false information submitted in a document to the Department of State constituteen third degree felony as provided for in s.817.155. F.S. Signature of an authorized person

Exped or printed name of signee-

Peter Renner Corry Jr.

Control Number: 20203555

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

PECO Ventures, 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 : 28240108 Date Inc/Auth/Filed : 09/29/2020 Jurisdiction : Georgia Print Date : 12/03/2024

Form Number 211



Brad Raffanspager