

MA500000/445

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

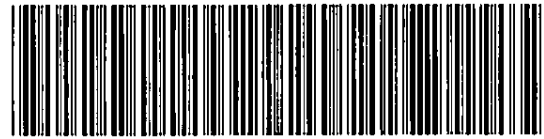
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/17/25 11:31:46

LEMIEX
JAN 30 2025

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. Collaborate Real Estate Group, 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. Tennessee
(Jurisdiction under the law of which foreign limited liability company is organized)

3. (FEI number, if applicable)

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

5. 5100 Poplar Ave
(Street Address of Principal Office)
Suite 1503
Memphis, TN 38137

6. 5100 Poplar Ave
(Mailing Address)
Suite 1503
Memphis, TN 38137

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

Name: Diane Robison

Office Address: 10150 Highland Manor Drive, Suite 216

Tampa, Florida 33610
(City) (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.

(Registered agent's signature)
Diane Robison

Vertical stamp: 11/17 PM 3:45

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: Scott L King, CEO
 Member Address: 5100 Poplar Ave.
 Authorized Suite 1503
Person Memphis, TN 38137
 Other _____ Other _____

Title or Capacity: **Name and Address:**
 Manager Name: Diane L Robison
 Member Address: 10150 Highland Manor Dr.
 Authorized Suite 216
Person Tampa, FL 33610
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
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

Diane L Robison

Typed or printed name of signee



Tre Hargett
Secretary of State

Division of Business Services
Department of State

State of Tennessee
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

SCOTT KING
SCOTT KING
635 KENROSE ST
COLLIERVILLE, TN 38017

January 8, 2025

Request Type: Certificate of Existence/Authorization
Request #: 0618979

Issuance Date: 01/08/2025
Copies Requested: 1

Document Receipt

Receipt #: 009430381 Filing Fee: \$20.00
Payment-Credit Card - State Payment Center - CC #: 3889528736 \$20.00

Regarding: Collaborate Real Estate Group, LLC
Filing Type: Limited Liability Company - Domestic Control #: 1507159
Formation/Qualification Date: 01/31/2024 Date Formed: 01/31/2024
Status: Active Formation Locale: TENNESSEE
Duration Term: Perpetual Inactive Date:
Business County: SHELBY COUNTY

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Collaborate Real Estate Group, LLC

- * is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett
Secretary of State

Processed By: Cert Web User

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