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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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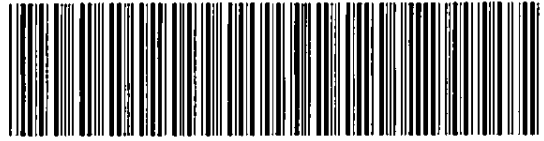
(Business Entity Name)

(Document Number)

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

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SEP 22 2025

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2025 SEP 22 AM 10:40  
TALLAHASSEE, FL

**GILL  
RAGON  
OWEN**  
ATTORNEYS

GILL RAGON OWEN, P.A.  
ATTORNEYS AT LAW  
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MEREDITH OVERTON | PARALEGAL  
EMAIL: [meredith@gill-law.com](mailto:meredith@gill-law.com)

September 10, 2025

Florida Department of State  
Division of Corporations – Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: Application for Authorization to Transact Business in Florida as a Foreign Limited Liability Company – *Silverleaf Education Holding Company, LLC***

Dear Sir or Madam:

Please find enclosed the Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for Silverleaf Education Holding Company, LLC.

Included in this package are:

1. Executed Application by Foreign LLC (Form CR2E027)
2. Arkansas Certificate of Good Standing (dated August 27, 2025)
3. Check in the amount of \$125.00 payable to Florida Department of State (covers \$100 application fee + \$25 registered agent designation)

We request that the enclosed application be processed and that confirmation of registration be returned to our office at your earliest convenience. Please direct all correspondence regarding this filing to:

Meredith Overton  
Gill Ragon Owen, P.A.  
425 West Capitol Avenue, Suite 3800  
Little Rock, AR 72201  
Email: [meredith@gill-law.com](mailto:meredith@gill-law.com)  
Phone: (501) 492-5971

Thank you for your assistance in this matter. If you have any questions or additional requirements, please do not hesitate to contact me.

Yours truly,

GILL RAGON OWEN, P.A.

BY: Meredith Overton

*Paralegal/Legal Assistant to  
Heartsill Ragon & Daniel Goodwin*



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 "LLC."

A preliminary search for name availability can be made on the Internet through the Division's records at [www.sunbiz.org](http://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:

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

➤ **Important 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 1<sup>st</sup> and May 1<sup>st</sup>. The fee for the annual report is \$138.75. After May 1<sup>st</sup> 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 1<sup>st</sup>, go to our website at [www.sunbiz.org](http://www.sunbiz.org). There is no provision to waive the late fee. Be sure to file before May 1<sup>st</sup>.

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:**  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Silverleaf Education Holding Company, 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:

Heartsill Ragon III  
Name of Person  
Gill Ragon Owen, P.A.  
Firm/Company  
425 West Capitol Avenue, Suite 3800  
Address  
Little Rock, Arkansas 72201  
City/State and Zip Code  
ragon@gill-law.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Meredith Overton at ( 501 ) 492-5971  
Name of Contact Person Area Code Daytime Telephone Number

**MAILING ADDRESS:**  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$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. Silverleaf Education Holding Company, 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. Arkansas 39-4243477
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. July 15, 2025
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 10802 Executive Center Drive, Suite 300
(Street Address of Principal Office)
Little Rock, AR 72211
6. 10802 Executive Center Drive, Suite 300
(Mailing Address)
Little Rock, AR 72211

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

Name: Registered Agents Inc.
Office Address: 7901 4th St N, Suite 300
St. Petersburg, Florida 33702
(City) (Zip code)

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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.

David Roberts

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

**Title or Capacity:**

**Name and Address:**

Manager

Tyler Wilson

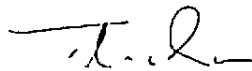
10802 Executive Center Drive, Suite 300

Little Rock, AR 72211

(Use attachments if necessary)

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

Tyler Wilson

Typed or printed name of signee



## Arkansas Secretary of State Cole Jester

State Capitol Building ♦ Little Rock, Arkansas 72201-1094 ♦ 501-682-3409

### **Certificate of Good Standing**

I, Cole Jester, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

### **SILVERLEAF EDUCATION HOLDING COMPANY, LLC**

authorized to transact business in the State of Arkansas as a Limited Liability Company, filed Articles of Organization in this office April 22, 2025.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



**In Testimony Whereof**, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 27th day of August 2025.

A handwritten signature in cursive script, reading "Cole Jester".

Cole Jester  
Secretary of State

Online Certificate Authorization Code: 067c051b4111e45

To verify the Authorization Code, visit [sos.arkansas.gov](http://sos.arkansas.gov)