# M24000003353

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

Office Use Only



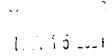
700424621467

02/27/24--01009--012 \*\*125.05

**RECEIVED** 

FEB 2 6 2024





#### COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJEC	Preferred Choice Properties LLC	
		e of Limited Liability Company
The encl Existence	losed "Application by Foreign Limited Liability ee, and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida
Please re	eturn all correspondence concerning this matter t	o the following:
	Heide Thomas	
		Name of Person
	Dearth Law	
		Firm/Company
	3460 Preston Ridge Road, Suite 150	
		Address
	Alpharetta, GA 30005	
		City/State and Zip Code
	Heide@dearthlaw.com	
	E-mail address: (to be	e used for future annual report notification)
For furth	ner information concerning this matter, please ca	III:
Heide Thomas		404 341-5857 at()
	Name of Contact Person	Area Code Daytime Telephone Number
Mailing Address: Registration Section		Street Address: Registration Section
Division of Corporations		Division of Corporations
P.O. Box 6327		The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEF  \$125.00 Filing Fee  \$130.00 Filing Fe  Certificate of	re & 🔲 \$155.00 Filing Fee & 🖂 \$160.00 Filing Fee, Certificate

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

Preferred Choice Prope	rties LLC					
(Name of Foreign	Limited Liability Company; must include "Limited	Liability	Company," "L.L.C.," or "LLC")			
	name adopted for the purpose of transacting business in FI	orida The a	alternate name must include "Limited Liabilit	y Company," "1.	L.C," or "L	.I.C.")
Georgia 2		3.	(FEI number, if			
(Jurisdiction under the law of which foreign limited liability company is organized)			(FEI number, if	applicable)		
4	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determi	registration ne penalty	.) iability)	_		
3460 Preston Ridge Ro	oad		3460 Preston Ridge Road	۵.	2(	
5. (Street Address of Principal Office)		6	(Mailing Address)	<u> </u>	<b>2</b> 024 FEB	
Suite 150			Suite 150			
	<u> </u>	•		<u> </u>	26	•
Alpharetta, GA 30005			Alpharetta, GA 30005	SVE	X.	•
<u> </u>		•		<u> </u>	AH 10: 3:	•
7. Name and street address	ss of Florida registered agent: (P.O. Box	<u>NOT</u> a	cceptable)	۳.	ယ	
Name:	Corporate Creations Network, Inc.		<del></del>			
	801 US Highway 1					
Office Address:						
	North Palm Beach		33408 , Florida			
	(Cny)		(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.

Jenisa Turner Jenisa Turner, Special Secretary
(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: Kyle Patrick Daigle Austin Blake Flachbarth ■Manager ■ Manager 3460 Preston Ridge Road 3460 Preston Ridge Road Address: □Member □Member Suite 150 Suite 150 □ Authorized ☐ Authorized Alpharetta, GA 30005 Alpharetta, GA 30005 Person Person □Other □Other Other □Other □Manager Name: □Manager Address: □Member Address: □Member □ Authorized □ Authorized Person Person □Other □Other □Other □Other □Manager Name: \_\_\_\_\_ □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 (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. Heide Thomas Signature of an authorized person Heide Thomas - Organizer

Typed or printed name of signee

Control Number: 19035206

## 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

#### Preferred Choice Properties 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 : 26725688 Date Inc/Auth/Filed: 03/13/2019 Jurisdiction : Georgia Print Date : 02/19/2024

Form Number : 211



Brad Raffonspager

**Brad Raffensperger Secretary of State**