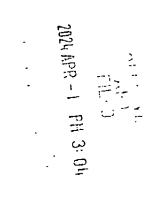
# M24000004166

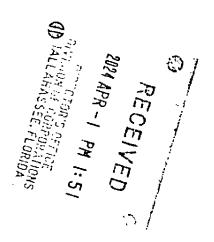
| (Requestor's Name)                      |                         |          |  |
|---|-------------------------|----------|--|
|   |                         |          |  |
| (Address)                               |                         |          |  |
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| (Address)                               |                         |          |  |
|   |                         |          |  |
|   | City/State/Zip/Phone #) |          |  |
| •                                       |                         |          |  |
| PICK-UP                                 | WAIT                    | MAIL     |  |
|   |                         |          |  |
| (i                                      | Business Entity Name)   |          |  |
|   |                         |          |  |
| (Document Number)                       |                         |          |  |
|   |                         |          |  |
| Certified Copies                        | Certificates of         | / Status |  |
|   |                         |          |  |
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| Special Instructions to Filing Officer: |                         |          |  |
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## FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 04

04/01/2024

NAME:

TRUWORTH BUILDINGS, LLC

TYPE OF FILING: APPLICATION

COST: 125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

#### **COVER LETTER**

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| TO:                                   | Registration Section Division of Corporations  |   |  |  |
|---------------------------------------|--|---|--|--|
| SUBJE                                 | TruWorth Buildings, LLC  |   |  |  |
|                                       |  | Tame of Limited Liability Company   |  |  |
| The enc<br>Existent                   | losed "Application by Foreign Limited Liabil<br>ce, and check are submitted to register the abo                                      | lity Company for Authorization to Transact Business in Florida," Certificate of ove referenced foreign limited liability company to transact business in Florida. |  |  |
| Please r                              | eturn all correspondence concerning this matt  | er to the following:  |  |  |
|                                       | Blake Harrison Alford  |   |  |  |
|                                       |  | Name of Person  |  |  |
|                                       | Centerline Business Services, LLC  | Centerline Business Services, LLC   |  |  |
|                                       |  | Firm/Company  |  |  |
|                                       | 813 Ridge Lake Blvd.   | 813 Ridge Lake Blvd.  |  |  |
|                                       | Address  |   |  |  |
|                                       | Memphis, Tennessee 38120   | Memphis, Tennessee 38120  |  |  |
|                                       |  | City/State and Zip Code   |  |  |
|                                       | balford@centerlinebs.com   |   |  |  |
|                                       | E-mail address: (to  | be used for future annual report notification)  |  |  |
| For furth                             | ner information concerning this matter, please   | call:   |  |  |
| Will Frazier                          |  | 901 259-8266<br>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 Tailahassee   |  |  |
|                                       | Tallahassee, FL 32314  | 2415 N. Monroe Street, Suite 810<br>Tallahassee, FL 32303   |  |  |
|                                       | Enclosed is a check for the following amount Please make check payable to: FLORIDA D  \$125.00 Filing Fee \$130.00 Filing Certificat | EPARTMENT OF STATE  |  |  |

# 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: L. TruWorth Buildings, 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.") Tennessee 99-1346208 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 813 Ridge Lake Blvd., Memphis, TN 38120 813 Ridge Lake Blvd., Memphis, TN 38120 (Street Address of Principal Office) (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Paracorp Incorporated Name: 155 Office Plaza Drive, 1st Floor Office Address: Tallahassee . Florida 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. SEE ATTACHED

(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: \_\_\_\_\_ TruWorth Rentals Holdings, LLC Name: Jeffrey B. Presley □Manager □ Manager Address: 813 Ridge Lake Blvd. Address: \_ 813 Ridge Lake Blvd. ■Member ■ Member Memphis, TN 38120 ☐ Authorized Memphis, TN 38120 ☐ Authorized Person Person □Other\_\_\_\_\_ □Other\_\_\_\_ Other\_\_\_\_ □Other\_\_\_\_ □ Manager □Manager Name: □ Member Address: □Member Address: ☐ Authorized ☐ Authorized Person Person Other\_\_ Other\_\_\_\_ Other\_\_\_\_ □Other\_\_\_\_ □ Manager Name: \_\_\_\_\_ □ Manager Name: \_\_\_\_\_ ☐ Member Address: □Member Address: Authorized ☐ Authorized Person Person □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. Signature of an authorized person

Typed or printed name of signee

Jeffrey B. Presley

#### STATE OF FLORIDA

#### REGISTERED AGENT CONSENT FORM

DATE: 03/29/2024

ENTITY NAME: TruWorth Buildings, LLC

#### REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated



### **Division of Business Services** Department of State

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

**PARASEC** 

2804 GATEWAY OAKS DR STE 100 SACRAMENTO, CA 95833

March 29, 2024

Request Type: Certificate of Existence/Authorization

0576106

Issuance Date: 03/29/2024

Copies Requested:

**Document Receipt** 

Receipt #: 008861793

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3870691592

\$20.00

Regarding:

Request #:

TruWorth Buildings, LLC

Filing Type:

Limited Liability Company - Domestic

Formation/Qualification Date: 02/14/2024

Status:

Active

Duration Term:

Perpetual

Business County: SHELBY COUNTY

Control #:

1511628 02/14/2024

Date Formed:

Formation Locale: TENNESSEE

Inactive Date:

#### 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

#### TruWorth Buildings, 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.

Secretary of State

Processed By: Cert Web User

Verification #: 066642929