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CORPORATION SERVICE COMPANY
1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 649486 8333703

AUTHORIZATION :

COST LIMIT : \$ 155/00

ORDER DATE: February 5, 2021

ORDER TIME : 11:11 AM

ORDER NO. : 649486-005

CUSTOMER NO: 8333703

FOREIGN FILINGS

NAME: G AND CHURCH, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER:

COVER LETTER

TO:	Registration Section Division of Corporations			
	ECT: Gand Church LLC			
SUBJI	Name of Limited Liability Company			
The en	iclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of nice, 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:			
	Name of Person			
Firm/Company				
Address				
City/State and Zip Code				
	E-mail address: (to be used for future annual report notification)			
For	further information concerning this matter, please call:			
	Name of Contact Person Area Code Daytime Telephone Number			
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Sircet Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE \$155.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy Certified			

February 5, 2021

Attention: State of Florida

Department of State Division of Corporations

Re: G and Church, LLC and G / Church Limited Partnership

Dear Sirs and Madams:

Please be advised that the undersigned is the sole member of G and Church, LLC, a California limited liability company.

G and Church, LLC is the sole general partner of G and Church Limited Partnership, a California limited partnership.

I am the authorized signature for the LLC and the Limited Partnership.

Should you require additional information, please feel free to contact me.

Very truly yours,

Tim J. Connole

2021 FEB -8 AH 10: 42

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS

	IGN LIMITED LIABILITY COMPA IN FLOI				
1. Sand (Name of Foreign Line	ited Enability Company; Inust include "Limited L	OWING IS SUBMITTED TO REGISTER A FOREM			
Transfer matter	artenated for the purpose of transacting business in Flori	ds. The whermate name must include "Limited Hability Compa	my." "LLC," or "LLC.")		
	foreign limited liability company is organized)	3. 546-68-8906 (Fel manber, if applicati)		
4. Upon Fe	(Dure that terfameted bristness in Florida, it price to at (See sections 605,0904 & 605,0905, F.S. to determine	gattation.) e pendry liability)			
5 245 KRB K	single Road	6. Par Box 751	<u>030</u>		
(Sirver Address of Prinsipal Office)	NV 89124	6. P.O. Box 751 Las Vegas, NV	189136		
			202		
7. Name and street address	of Florida registered agent: (P.O. Box	NOT acceptable)	#PB - FEB - FI		
Name:	Corporation Service Company				
ixamç.	1201 Hays Street		AH 10: 42		
Office Address:	Tallahassee	32301 . Fjorida	ų2		
	(City)	(Z:p cod:)			
designated in this applica	ions of all statutes relative to the propes of iny position as registered agent. Corporation Service Company By: Janua & Fland	f process for the above stated limited liabili as registered agent and agree to act in this er and complete performance of my duties,	ty company at the place capacity. I further agree and I am familiar with		
(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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: □Manager Manager Address: Address: Po. Box 75/030 □Member □ Authorized □ Authorized Person, Person ☐Other____ □Other__ Other_ Other_ Name: □Мападег Name: ______ □Manager Addréss: Address: \square Member □ Authorized □ Authorized Person Person □Other:_____ Other_ Other____ Other_ Name: □Manager Name: ______ □Manager Address: □Member Address: □Member □ 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 oathof 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.



I, JAMES SCHWAB, Acting Secretary of State of the State of California, hereby certify:

Entity Name: G AND CHURCH, LLC

 File Number:
 201429610163

 Registration Date:
 10/21/2014

Entity Type: DOMESTIC LIMITED LIABILITY COMPANY

Jurisdiction: CALIFORNIA

Status: ACTIVE (GOOD STANDING)

As of January 25, 2021 (Certification Date), the entity is authorized to exercise all of its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the Certification Date and does not reflect documents that are pending review or other events that may affect status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of January 26, 2021.

JAMES SCHWAB
Acting Secretary of State

Certificate Verification Number: R4E13VY

To verify the issuance of this Certificate, use the Certificate Verification Number above with the Secretary of State Certification Verification Search available at bebizfile.sos.ca.gov/certification/index.