

M24000002532

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

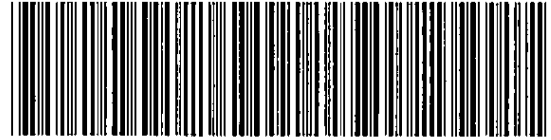
(Document Number)

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

Special Instructions to Filing Officer:

W24-26803

Office Use Only



900423095279

2024 FEB 16 AM 10:19

FILED

RECEIVED

2024 FEB 16 PM 12:27

RECEIVED

M. SOLOMON

FEB 28 2024



115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
P: 866.625.0838  
F: 866.625.0839  
COGENCYGLOBAL.COM

Account#: 120000000088  
If there are any issues  
please contact Patrice at  
850-202-9071

Date: 02/27/2024

Name: Patrice Rush

Reference #: 2269573

Entity Name: GUERNSEY P.L.L.C.

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other \_\_\_\_\_

Authorized Amount: \$125.00

Signature: 

**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. Guernsey P.L.L.C. 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. Mississippi  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 81-3159357  
(FEI number, if applicable)

4. 3/1/2024  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 5555 North Grand Boulevard  
(Street Address of Principal Office)

6. Same as #5  
(Mailing Address)

Oklahoma City, OK 73112

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

Name: Cogency Global Inc.

Office Address: 115 North Calhoun St. Suite 4

Tallahassee, Florida 32301  
(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.*

2024 FEB 16 AM 10:19

FILED

*Handwritten 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:  
 Manager      Name: Mauro Dallabattista  
 Member        Address: 5555 North Grand Boulevard  
 Authorized      Oklahoma City, OK 73112  
Person \_\_\_\_\_  
 Other \_\_\_\_\_                       Other \_\_\_\_\_

Manager      Name: Omar Khoury  
 Member        Address: 5555 North Grand Boulevard  
 Authorized      Oklahoma City, OK 73112  
Person \_\_\_\_\_  
 Other \_\_\_\_\_                       Other \_\_\_\_\_

Manager      Name: Jared Stigge  
 Member        Address: 5555 North Grand Boulevard  
 Authorized      Oklahoma City, OK 73112  
Person \_\_\_\_\_  
 Other \_\_\_\_\_                       Other \_\_\_\_\_

Title or Capacity:                      Name and Address:  
 Manager      Name: \_\_\_\_\_  
 Member        Address: \_\_\_\_\_  
 Authorized      \_\_\_\_\_  
Person \_\_\_\_\_  
 Other \_\_\_\_\_                       Other \_\_\_\_\_

Manager      Name: \_\_\_\_\_  
 Member        Address: \_\_\_\_\_  
 Authorized      \_\_\_\_\_  
Person \_\_\_\_\_  
 Other \_\_\_\_\_                       Other \_\_\_\_\_

Manager      Name: \_\_\_\_\_  
 Member        Address: \_\_\_\_\_  
 Authorized      \_\_\_\_\_  
Person \_\_\_\_\_  
 Other \_\_\_\_\_                       Other \_\_\_\_\_


2024 FEB 16 AM 10:19

FILED

**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  
  
Jared Stigge  
\_\_\_\_\_  
Typed or printed name of signer



**Michael Watson**

SECRETARY OF STATE

Office of the Secretary of State  
Jackson, Mississippi

## Certificate of Good Standing

I, MICHAEL WATSON, Secretary of State of the State of Mississippi, and as such, the legal custodian of the records as required by The Mississippi Limited Liability Company Act to be filed in my office do hereby certify:

**GUERNSEY, P.L.L.C.**

Registered the 12th day of January, 2016

A Mississippi Limited Liability Company has filed the necessary documents in this office and has obtained a certificate of formation under the provisions of The Mississippi Limited Liability Company Act as shown by the records in this office.

That the registered office of said Limited Liability Company is located at:

248 E. Capitol Street , Suite 840  
Jackson, MS 39201

And that the registered agent at that address is:

Cogency Global Inc.

I further certify that said Limited Liability Company has paid the fees for filing the above papers required by law as shown by the records of this office, and that said Limited Liability Company is in good standing to do business in Mississippi at this time.

Given under my hand and seal of office  
the 15th day of February, 2024

A handwritten signature in black ink that reads "Michael Watson".

Certificate Number: CN24182368

Verify this certificate online at <http://corp.sos.ms.gov/corpcnv/verifycertificate.aspx>



February 22, 2024

**Florida Department of State**

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

To whom it may concern,

In accordance with the requirements set forth to qualify an Architectural Business Organization, at least one of the managing members will be duly licensed or otherwise legally authorized to render one or more of the professional services(s) for which this limited liability company is organized.

The professional services to be rendered are architectural services. The licenses to be held to provide the services are Registered Architects.

**Managing Member - Mauro Dallabattista FL License # AR97997**

**Member - Omar Khoury FL License # AR103225**

Sincerely,

C. H. Guernsey & Company

Jared Stigge  
CEO/President



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 17, 2024

COGENCY GLOBAL

SUBJECT: GUERNSEY P.L.L.C.  
Ref. Number: W24000026803

*Please  
Keep original  
File Date of  
2/15/2024  
2-16-24*

We have received your document for GUERNSEY P.L.L.C. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law does not provide for the recognition of a foreign professional limited liability company. An acceptable limited liability company suffix will need to be added to your entity name for this Department to accept and file your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

KYLE D BRUMBLEY  
Regulatory Specialist II Supervisor

Letter Number: 724A00003536

RECEIVED  
2024 FEB 22 PM 12:11  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 23, 2024

COGENCY GLOBAL

SUBJECT: GUERNSEY P.L.L.C.  
Ref. Number: W24000026803

Please  
Keep  
Original  
File date  
of  
2/15/2024  
2-16-24

We have received your document for GUERNSEY P.L.L.C. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Florida law does not provide for the recognition of a foreign professional limited liability company. An acceptable limited liability company suffix will need to be added to your entity name for this Department to accept and file your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

KYLE D BRUMBLEY  
Regulatory Specialist II Supervisor

Letter Number: 724A00004015

RECEIVED  
2024 FEB 27 PM 4:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA