## A1100000104

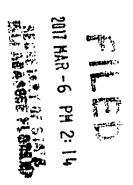
(Requ	uestor's Name)
(Addi	ress)
(Addı	ress)
(City/	State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busi	ness Entity Name)
(Doc	ument Number)
Certified Copies	Certificates of Status
Special Instructions to Fi	iling Officer: 3/4/2017 Show and a second se
WHAT HOPPISM	

Office Use Only



200295291442

02/15/17--01004--018 \*\*1000.00



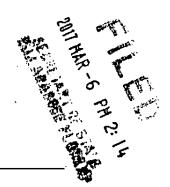
M. MILLIGAN MAR = 6 2017,

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: GNIC	LLLP
Name of Florida Limited Pa	rtnership or Limited Liability Limited Partnership
The enclosed Certificate of Limited Partne	rship and fees are submitted for filing.
Please return all correspondence concerning	g this matter to:
ZACHARY ABERT S	- MITH
Firm/Company	
Sog NORTH POINT R  Address  St. August Ng, FL  City, State and Zip Code	ØAD
St. AUGUSTING, FL. City, State and Zip Code	32084
E-mail address: (to be used for future annual)	
For further information concerning this ma	atter, please call:
Pachary A. Smith  Name of Contact Person	at ( 904 ) 382 2019  Area Code and Daytime Telephone Number
Enclosed is a check for the following amou	unt:
\$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee) \$1,008.75 Filing Fee and Certificate of Status	\$1,052.50 Filing Fees and Certified Copy  \$1,061.25 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations	Division of Corporations
Clifton Building 2661 Executive Center Circle	P. O. Box 6327
Tallahassee, FL 32301	Tallahassee, FL 32314

CR2E030 (01/06)

## CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP



GNIC LLLP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

2	509	NORTH	POINT	KOAU	•		
		(Stree	et address of ini	tial designa	ted office)		
	St.	AUGUSTI	NE, FL	- 320	B4		
i		Name of					
		(Name of	Registered Age	ent for Serv	ice of Process	;)	
·	506	•	POINT	_			
		(Florid	da street address	s for Registe	ered Agent)		
	St.	ANGUSTIA	US EI	72	na4		
omply	ereby accept to with the prov	he appointment a isions of all statu	s registered age ites relative to t	ent and agre he proper a	re to act in thi nd complete p	performance o	
omply	ereby accept to with the prov	he appointment a	s registered age ites relative to t	ent and agre he proper a	re to act in thi nd complete p	performance o	
omply	ereby accept to with the prov	he appointment a isions of all statu th and accept the	s registered age tes relative to the obligations of t	ent and agre he proper a ny position	re to act in thi nd complete p as registered	performance o	
omply	ereby accept to with the prov	he appointment a isions of all statu th and accept the	s registered age ites relative to t	ent and agree the proper a my position cgistered A	re to act in thi nd complete p as registered	performance o	
omply	ereby accept to with the prov m familiar wi	he appointment as isions of all status the and accept the	s registered age ites relative to the obligations of the Bignature of R	ent and agree the proper a ny position cgistered A	re to act in thind complete pas registered	performance o	
omply	ereby accept to with the prov m familiar wi	he appointment as isions of all status the and accept the	s registered age ites relative to the obligations of the Signature of R	ent and agree he proper a ny position cgistered A	e to act in the nd complete p as registered gent  O nted office)	performance o	
omply	ereby accept to with the prov m familiar wi	he appointment as isions of all status the and accept the	s registered age tes relative to to obligations of the Signature of R	ent and agree he proper a ny position cgistered A	e to act in the nd complete p as registered gent  O nted office)	performance o	

ame:	Business Address:
ZacHary A. SMITH	ST. DUGUSTING, FL 32084
1	ST. DUGUSTING, FL 32084
SEE ATTACHEND	PAGAS FOR JON PARINZAS
ADDITION	JON PARTNERS
	——————————————————————————————————————
1760 - 1 1 10 11 11 11 11	
Effective date, if other than the date of f	filing:
Effective date cannot be prior to no iled by the Florida Department of S	or more than 90 days after the date the document is State.)
signed thisday c	of January 2017
Signature of each general partner: I/	I/We submit this document and affirm that the facts aware that any false information submitted in a tre constitutes a third degree felony as provided for in
document to the Department of Stat	

Page 2 of 2

you have received this communication in error please return it to the sender and then delete the e-mail and destroy any copies of it. Whilst reasonable precautions have been taken to ensure no software viruses are present in our emails we cannot guarantee that this e-mail or any attachment is virus-free or has not been intercepted or changed. Any opinions or other information in this e-mail that do not relate to the official business of Arcadis are neither given nor endorsed by it.

John Filly Newcomb	1938 Upper Lake Orive
	Reston, VA 20191-3620
Indith Kuilan News	inh 1938 Upper Loke Drive
	Reston, VA 20191-3620
	Tresta y VA LOTTESOTO
· · · · · · · · · · · · · · · · · · ·	
	444-44
- And Committee Annual Committee Com	·
<u></u>	
	<b>X</b>
	Ap 1/2
to some od stella filozofician die dianesi.	
iskel by the Florida Department of S	or more than 90 days after the date the document to the State of the s
Samuel time _ 711 _ stay o	February 2017
	We submit this document and affirm that the facts
stated barein, are toue. I'We can late a	nware that any false information submission is
*X17 155, FX	to constitutes a third degree felory as provided for
feet to	Louiston Ywan O
	<u> </u>
	- Wilderstein and a second of the second of
Filing Fees:	\$1,000,00 SPANISH TO HE SAVERED ASSESSMENT TO
filing Fees: fertified Copy toptionali: fertificate of Status toptional):	\$1,000,00 (SPACE Arg. or and \$35 km2, take, Avida Fee \$52.50 \$8.75

TETE MILITALE	9646 Douglas Ave.	
JEFF WHILIDE	SIGTO DOWNING FIVE!	
	Dallas IX 1522	5
		•
		-
		-
	<b>₩</b> e.	
		芸
•		
	**	J G
		D.
		(E)
		•
9. Effective date, if other than the date of	filing:	
9. Effective date, if other than the date of		
(Effective date cannot be prior to n	or more than 90 days after the date the document is	
(Effective date cannot be prior to ne filed by the Florida Department of	or more than 90 days after the date the document is State.)	
(Effective date cannot be prior to n	or more than 90 days after the date the document is State.)	
(Effective date cannot be prior to no filed by the Florida Department of Signed this day of Signature of each general partner; 1	or more than 90 days after the date the document is State.)  of February 2017.  We submit this document and affirm that the facts	
(Effective date cannot be prior to no filed by the Florida Department of Signed this	or more than 90 days after the date the document is  State.)  of February 2017.  We submit this document and affirm that the facts aware that any false information submitted in a	
(Effective date cannot be prior to no filed by the Florida Department of Signed this	or more than 90 days after the date the document is State.)  of February 2017.  We submit this document and affirm that the facts	
(Effective date cannot be prior to middled by the Florida Department of Signed this	or more than 90 days after the date the document is  State.)  of February 2017.  We submit this document and affirm that the facts aware that any false information submitted in a	
(Effective date cannot be prior to middled by the Florida Department of Signed this	or more than 90 days after the date the document is  State.)  of February 2017.  We submit this document and affirm that the facts aware that any false information submitted in a	
(Effective date cannot be prior to middled by the Florida Department of Signed this	or more than 90 days after the date the document is  State.)  of February 2017.  We submit this document and affirm that the facts aware that any false information submitted in a	
Signature of each general partner; I stated herein are true. I/We am/are document to the Department of States. 817.155, F.S.	or more than 90 days after the date the document is State.)  of February 2017.  We submit this document and affirm that the facts aware that any false information submitted in a te constitutes a third degree felony as provided for in	
(Effective date cannot be prior to middled by the Florida Department of Signed this	or more than 90 days after the date the document is  State.)  of February 2017.  We submit this document and affirm that the facts aware that any false information submitted in a	

S. Name and business address of a Same	Business Address
Curt A Cramer	Defiat MI 48214
	Deficit MI 48214
-	
	and the contract of the contra
	of the filled Pales 14 ANDERS 1. ANDERS 1. ANDERS 1. AND
All the compression of the compr	Principle Space Colors (
	is many as many propagative management and a state of the section
	?
demands of the second of the s	To.
	**************************************
29 bit everya date, if ether than the date estimate.	
juli d liv die Dorada Department of .	or more than 90 days after the date the document is. State (
Second that 3/1	January 2017
stated become are true. If We am note:	We submit this document and affirm that the facit aware that any false information submitted in a
document to the Department of States (ALSIMES)	e constitutes a third degree felony as provided or .
CAM CHINN	
1 / Charles De consequente l'amin ann annonne a conseque	to the C
The continues of the continues of	
Filing kees:	SLOHILOD (Sport applied on 1955 Registered Adding For
Certified Copy (optional):	\$52,50
Certificate of Status (optional):	\$8.75 Page 2 of 2

....

	Business Address:
Charles Newcomb	Wilmington, NC 28403
	Wilmington NC 18403
	Control of the second
	The second secon
·	
The state of the s	7
2. Piffective date, if other than the date of t	filing
(Effective date cannot be prior to no	or more than 90 days after the date the document is
(Effective date cannot be prior to ne filed by the Florida Department of .	or more than 90 days after the date the document is State)
(Effective date cannot be prior to ne filed by the Florida Department of .	or more than 90 days after the date the document is State)
(Effective date cannot be prior to no filed by the Florida Department of Signed this 30 day o	or more than 90 days after the date the document is State)  of January 7017
(Effective date cannot be prior to no filed by the Florida Department of Signed this 30 day of Signature of each general partner listated herein are true I/We arrivate	or more than 20 days after the date the document is  State    of
(Effective date cannot be prior to ne filed by the Florida Department of Signed this 30 day of Signature of each general partner 1, stated herein are true UWe am/are a document to the Department of Stated	or more than 90 days after the date the document is State)  of January 7017
(Effective date cannot be prior to no filed by the Florida Department of Signed this 30 day of Signature of each general partner listated herein are true I/We arrivate	or more than 20 days after the date the document is  State    of
(Effective date cannot be prior to ne filed by the Florida Department of Signed this 30 day of Signature of each general partner 1, stated herein are true UWe am/are a document to the Department of Stated	or more than 20 days after the date the document is  State    of
(Effective date cannot be prior to ne filed by the Florida Department of Signed this 30 day of Signature of each general partner 1, stated herein are true UWe am/are a document to the Department of Stated	or more than 20 days after the date the document is  State    of
(Effective date cannot be prior to ne filed by the Florida Department of Signed this 30 day of Signature of each general partner 1, stated herein are true UWe am/are a document to the Department of Stated	or more than 20 days after the date the document is  State    of
(Effective date cannot be prior to ne filed by the Florida Department of Signed this 30 day of Signature of each general partner 1, stated herein are true UWe am/are a document to the Department of Stated	or more than 20 days after the date the document is  State    of
(Effective date cannot be prior to no filed by the Florida Department of Signed this 30 day of Signature of each general partner It stated herein are true I/We arn/are a document to the Department of States 817 155, F.S.	or more than 20 days after the date the document is  State    of
(Effective date cannot be prior to no filed by the Florida Department of Signature of each general partner 1, stated herein are true U/We arr/are a document to the Department of States 817 155, F.S	or more than 90 days after the date the document is State.)  of

MATT BRYAW	311 E. PARK AVE
	TAUAHASSEE, FL 3230
eren en e	
Security of the second	
	) y manus ( ) — processor ( )
To account the contract the contract of the co	
9. Officers a date, if other than the date of	hing
thed by the Florida Department of	
Segmed this	of Florkary.
stated herein are true. I/We am/are	We subout this document and affirm that the facts aware that any false submation submitted in a te constitutes a third degree felony as provided for in
Hours Sy-	
The second secon	