

F24000001247

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

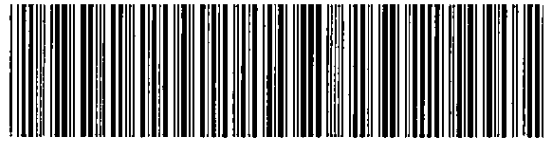
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

W24-30423 NOT Avail

Office Use Only



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2024 MAR -5 AM 11:05

RECEIVED
FEB 22

2024 FEB 22 PM 3:43

RECEIVED

CALLAHAN ASSOCIATES, LLC

MAR 06 2024

K. Brumbley



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 4, 2024

CAPITAL CONNECTION, INC.

SUBJECT: GALPIN LIMITED
Ref. Number: W24000030423

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

The business name is not available so different business name must be listed in line 2 of the application.

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: 124A00004696

RECEIVED
2024 MAR -5 PM 2:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

GALPIN IMITED FLORIDA INC

Please Debit FCA000000003 For: 70

Thank you Seth Neeley



Signature

Requested by:

Name

Date

Time

____ Art of Inc. File _____
____ LTD Partnership File _____
____ ☒ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GALPIN LIMITED

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

STEPHANIE MURPHY

Name of Person

HARDING BELL INTERNATIONAL, INC.

Firm/Company

113 PONTOTOC PLAZA

Address

AUBURNDALE, FL 33853

City/State and Zip code

BUSINESSSERVICES@HBITAX.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEPHANIE MURPHY

at (863) 968-1010

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. GALPIN LIMITED

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

GALPIN LIMITED FLORIDA, INC.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. ENGLAND

(State or country under the law of which it is incorporated)

3.

(FEI number, if applicable)

4. JULY 7, 2023

(Date of incorporation)

5.

(Date of duration, if other than perpetual)

6.

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 113 PONTOTOC PLAZA, AUBURNDALE, FL 33823

(Principal office street address)

THE CROFT, LYNTHURST ROAD, BRANSGORE, CHRISTCHURCH, ENGLAND BH23 8JY

(Current mailing address, if different)

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

Name: HARDING BELL INTERNATIONAL, INC.

Office Address: 113 PONTOTOC PLAZA

AUBURNDALE, Florida 33823
(City) (Zip code)

2024 MAR - 5 AM 11

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

Stephanie Murphy
(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

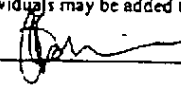
A. DIRECTORS

<input type="checkbox"/> Chairman	Name: _____	<input type="checkbox"/> Chairman	Name: _____
<input type="checkbox"/> Vice Chairman	Address: <u>The Croft, Lyndhurst Road</u>	<input type="checkbox"/> Vice Chairman	Address: _____
<input checked="" type="checkbox"/> Director	<u>Christ Church, UK B423 8JY</u>	<input type="checkbox"/> Director	_____
<input type="checkbox"/> President	_____	<input type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	_____	<input type="checkbox"/> Secretary	_____
<input type="checkbox"/> Other	_____	<input type="checkbox"/> Treasurer	_____
<input type="checkbox"/> Other	_____	<input type="checkbox"/> Other	_____

<input type="checkbox"/> Chairman	Name: _____	<input type="checkbox"/> Chairman	Name: _____
<input type="checkbox"/> Vice Chairman	Address: _____	<input type="checkbox"/> Vice Chairman	Address: _____
<input type="checkbox"/> Director	<u>The Croft, Lyndhurst Road</u>	<input type="checkbox"/> Director	_____
<input checked="" type="checkbox"/> President	<u>Christ Church, UK B423 8JY</u>	<input type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	_____	<input type="checkbox"/> Secretary	_____
<input type="checkbox"/> Other	_____	<input type="checkbox"/> Treasurer	_____
<input type="checkbox"/> Other	_____	<input type="checkbox"/> Other	_____

<input type="checkbox"/> Chairman	Name: _____	<input type="checkbox"/> Chairman	Name: _____
<input type="checkbox"/> Vice Chairman	Address: _____	<input type="checkbox"/> Vice Chairman	Address: _____
<input type="checkbox"/> Director	_____	<input type="checkbox"/> Director	_____
<input type="checkbox"/> President	_____	<input type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	_____	<input type="checkbox"/> Secretary	_____
<input type="checkbox"/> Other	_____	<input type="checkbox"/> Treasurer	_____
<input type="checkbox"/> Other	_____	<input type="checkbox"/> Other	_____

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.

12.  _____
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. OLIVER GALPIN, DIRECTOR
(Typed or printed name and capacity of person signing application)



THE COMPANIES ACT 2006

Company No. 14985795

The Registrar of Companies for England and Wales hereby certifies that GALPIN LIMITED was incorporated under the Companies Act 2006 as a limited company on 6th July 2023.

The Registrar further certifies that according to the documents on the file of the company:-

- a) MICHAEL JAMES GALPIN whose service address is THE CROFT, LYNDHURST ROAD, BRANSGORE, CHRISTCHURCH, ENGLAND BH23 8JY, born in March 1957, appointed on 6th July 2023 a British national, a resident of England and OLIVER JAMES GALPIN whose service address is THE CROFT, LYNDHURST ROAD, BRANSGORE, CHRISTCHURCH, ENGLAND BH23 8JY, born in December 1987, appointed on 6th July 2023 a British national, a resident of England are the directors of the company.
- b) JANET ELIZABETH GALPIN whose service address is THE CROFT, LYNDHURST ROAD, BRANSGORE, CHRISTCHURCH, ENGLAND BH23 8JY, appointed on 6th July 2023 is the secretary of the company.
- c) the situation of the registered office is THE CROFT, LYNDHURST ROAD, BRANSGORE, CHRISTCHURCH, ENGLAND BH23 8JY,
- d) the company has unrestricted objects.

According to the documents on file and in the custody of the Registrar, the company is up to date with its filing requirements and has at least 1 director, who is a natural person over the age of 16.

The company has been in continuous unbroken existence since its incorporation and no action is currently being taken by the Registrar of Companies to strike the company off the register or to dissolve it as defunct. As far as the Registrar is aware, the company is not currently subject to one or more of the following: liquidation, company voluntary arrangement (or company voluntary arrangement moratorium), administration, moratorium or has a receiver or manager appointed.*****

Given at Companies House, the 21st December 2023

for the Registrar of Companies

This certificate records the result of a search of the information registered by the Registrar. This information derives from filings accepted in good faith without verification. For this reason the Registrar cannot guarantee that the information on the register is accurate or complete.



Companies House