# F24000003015

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
, , , ,
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W24000015507

Office Use Only



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2024 JUN-6 PM 12: 58 JULY JUN -7
SEERIARY SEE, FLORIL



1902 Demere Rd Saint Simons Island, GA 31522 (912) 638-3640 contact@tasteful-templations.com

June 6, 2024

To whom it may concern:

On May 8, 2024 We filed for Domestic For Profit Company in the State of Florida. It was approved, reference document number P24000033207.

On June 5 2024 we dissolved that company as we learned that we eant to file a Foreign Entity For Profit Corporation in Florida.

Our main business in is Georgia and it will remain in Georgia. We would like to be able to transact business in Florida.

Please accept this letter to resolve the rejection of the Foreign Entity documentation based on the name not being available, as the name in Florida was our registered business name.

If you have any other questions please contact, Susan Grizich, Assistant to the Owner, Mr. Brian Justice at (915) 667-0237 if you have any further questions regarding this matter.

Thank You,

Susan Grizich

Tasteful Temptations

Assistant Manager

1902 Demere Rd

Saint Simons Island, GA 31522

5110 W 12th St

Jacksonville, FL 32254

(915) 667-0237

Recid 2024



June 6, 2024

BRIAN D. JUSTICE 1902 DEMERE RD SAINT SIMONS ISLAND, GA 31522 US

SUBJECT: TASTEFUL TEMPTATIONS, INC.

Ref. Number: W24000085507

We have received your document for TASTEFUL TEMPTATIONS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

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.

Andrea Andrews Regulatory Specialist II

Letter Number: 824A00012320

### **COVER LETTER**

TO: Registration Section Division of Corporation	ons		
SUBJECT: Tastefulle Tempt			
3000LC1.	Name of corporation -	must include suffix	
Dear Sir or Madam:			
The enclosed "Application by "Certificate of Existence," or above referenced foreign corporate.	Certificate of Good Standi	ng" and check are subm	
Please return all corresponden	ce concerning this matter to	the following:	
Brian D. Justice			
	Name of Pe	rson	
Tasteful Temptations, Inc			
	Firm/Compa	iny	
1902 Demere Rd			
	Address		
Saint Simons Island, GA 31522			
	City/State and	Zip code	
brian@tasteful-temptations.com			
E-n	ail address: (to be used for	future annual report not	tification)
For further information concer	ning this matter, please cal	:	
Brian D. Justice	912 at (	996-4053	
Name of Person	Area Code	Daytime Telepho	ne Number
STREET/COURIER Registration Section Division of Corporatio The Centre of Tallahas 2415 N. Monroe Stree Tallahassee, FL 3230	ns see t, Suite 810	MAILING AD Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations
	ORIDA DEPARTMENT O	F STATE 178.75 Filing Fee & Certified Copy	■ \$87.50 Filing Fee, Certificate of Status & Certified Copy

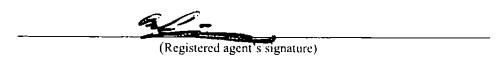
# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

l. <u> </u>			
(Enter name of c	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate name ac	opted for the purpose of transacting bus	siness in Florida)
Georgia 2.	3 2	0297851	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
4. May 1, 2007	5.		
(Date of incorporation) 5.		(Date of duration, if other than perpetual)	
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150		
		2. F.S., to determine penalty liability)	
	(SEE SECTIONS 607.1501 & 607.150 , Saint Simons Island, GA 31522 (Principal office	2. F.S., to determine penalty liability)	
7	(SEE SECTIONS 607.1501 & 607.150 , Saint Simons Island, GA 31522 (Principal office	2, F.S., to determine penalty liability)  street address)  address, if different)	L- MAIF 12707
7. 1902 Demere Rd  3. Name and street  Name:	(SEE SECTIONS 607.1501 & 607.150 , Saint Simons Island, GA 31522  (Principal office  (Current mailing	2, F.S., to determine penalty liability)  street address)  address, if different)	H4 L-HAT 6.707
3. Name and stree	(SEE SECTIONS 607.1501 & 607.150 , Saint Simons Island, GA 31522  (Principal office  (Current mailing et address of Florida registered agent: (P.O. Brian D. Justice	2, F.S., to determine penalty liability)  street address)  address, if different)  Box NOT acceptable)	-7

#### 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.



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.

#### · · A. DIRECTORS Brian D. Justice Name: □ Chairman Chairman Name: \_\_\_\_\_ 1902 Demere Rd □Vice Chairman Address: □Vice Chairman Address: Saint Simons Ilsand, GA 3 22 □ Director □ Director **■** President ☐ President □Vice President \_\_\_\_\_ □ Vice President ☐Treasurer □ Secretary ☐ Secretary Treasurer Other \_\_\_\_\_ □Other \_\_\_\_\_ Other \_\_\_\_ ☐Other \_\_\_\_\_ □ Chairman Name: \_\_\_\_\_ □ Chairman Name: □Vice Chairman Address: \_\_\_\_\_ □ Vice Chairman Address: \_\_\_\_\_\_ □ Director □ Director □President □ President □Vice President □Vice President ☐ Secretary □Treasurer ☐ Treasurer □Secretary □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other □Other □ Chairman □ Chairman Name: \_\_\_\_\_\_ □Vice Chairman Address: \_\_\_\_\_ ☐ Vice Chairman Address: ☐ Director □ Director ☐ President □ President □Vice President \_\_\_\_\_ ☐ Vice President ☐ Secretary ☐ Treasurer □ Secretary □Treasurer □Other \_\_\_\_\_ □Other \_\_\_\_ □Other \_\_\_\_\_ 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. he-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.

(Typed or printed name and capacity of person signing application)

Brian D. Justice

Control Number: 07045986

## STATE OF GEORGIA

**Secretary of State Corporations Division** 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### TASTEFUL TEMPTATIONS, INC.

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

> Docket Number : 27351504 Date Inc/Auth/Filed: 06/01/2007 Jurisdiction : Georgia : 06/05/2024 Print Date

Form Number : 211



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Brad Raffensperger

Brad Raffensperger Secretary of State