

TRANSMITTAL LETTER

M 0000000 2546

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: Craig Ganas, LLC

(Name of corporation - must include suffix)

12/8

Dear Sir or Madam:

form  
00789-00524-02827-00476-00671

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", 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:

MJH

Anne G. Hodges, CPA

(Name of Person)

Anne G. Hodges, CPA

(Firm/Company)

000003469920--7  
-12/11/00--01154--005  
\*\*\*\*\*72.50 \*\*\*\*\*72.50

P. O. Box 1409

(Address)

Cross City, FL 32628

(City/State/Zip)

W-28039

Should you need to call someone concerning this matter, please call:

000003469920--7  
-11/20/00--01044--003  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

Anne G. Hodges, CPA

(Name of Person)

at 352-498-7067

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

00 DEC -8 AM 11:13  
STATE  
DIVISION OF CORPORATIONS

Enclosed is a check for the following amount:

☐ \$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



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

November 28, 2000

ANNE G. HODGES, CPA  
P.O. BOX 1409  
CROSS CITY, FL 32628

SUBJECT: CRAIG GANAS, LLC  
Ref. Number: W00000028039

We have received your document for CRAIG GANAS, LLC 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 form submitted is for a Corporation, however, according to the Certificate, this entity is a Limited Liability Company. Please complete the attached form.,

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$72.50.

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) 487-6967.

Michelle Hodges  
Document Specialist

Letter Number: 500A00060424

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Craig Ganas, LLC  
(Name of foreign limited liability company)
2. Georgia  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 58-2525877  
(FEI number, if applicable)
4. February 21, 2000  
(Date of Organization)
5. perpetual  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. none prior to date of documents  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 310 West Dame Avenue  
Homerville, Ga 31634  
(Street address of principal office)
8. If limited liability company is a manager-managed company, check here ☐
9. The usual business addresses of the managing members or managers are as follows:  
Craig Ganas  
310 West Dame Avenue  
Homerville, Ga 31634
10. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Leasing of LLC owned vehicles used in timber management by related Fl corporation

Craig Ganas  
Signature of a member or an authorized representative of a member.  
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Craig Ganas  
Typed or printed name of signee

FILED  
STATE  
RECORDS  
DIVISION  
00 DEC -8 AM 11:13

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Craig Ganas

2. The name and the Florida street address of the registered agent and office are:

Anne G. Hodges, CPA

(Name)

101 SW Dixie Street

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Cross City

FL 32628

City/State/Zip

*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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.*

Anne G. Hodges

(Signature)

\$100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

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

DOCKET NUMBER : 003180755  
CONTROL NUMBER : 0009014  
DATE INC/AUTH/FILED: 02/21/2000  
JURISDICTION : GEORGIA  
PRINT DATE : 11/13/2000  
FORM NUMBER : 211

ANNE G. HODGES, CPA  
P.O. BOX 1409  
CROSS CITY, FL 32628

**CERTIFICATE OF EXISTENCE**

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

**CRAIG GANAS, LLC.**  
**A GEORGIA LIMITED LIABILITY COMPANY**

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above 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.



Cathy Cox  
Secretary of State