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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Got Beach, LLC		
	Name of Limited Liability Company)	
	Limited Liability Company for Authorization to Transcheck are submitted to register the above referenced for in Florida	
Please return all correspondence conc	erning this matter to the following:	
J. B	radley Guarino-Sanders, Attorney at Law	
	(Name of Person)	
Guarino-Sanders & Mult, PSC		OS AUG 15 SEGRE AND INTERPRETATION OF AUG 15
	(Firm/Company)	
117 E. Spring Street, 5th Floor		FILED AN
(Address)		STA STA
		29 AFE 29
	New Albany, IN 47150	_
	(City/State and Zip Code)	
For further information concerning th	is matter, please call:	
J. Bradley Guarino-Sanders	at (812) 941-8980	
(Name of Perso		umber)
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section	
Division of Corporations	Division of Corporations	
409 E. Gaines Street	P.O. Box 6327	
Tallahassee, Florida 32399	Tallahassee, Florida 32314	
Enclosed is a check for the following	amount:	
Ø \$125.00 Filing Fee ☐ \$130.0	O Filing Fee & \$\sum \$155.00 Filing Fee & \$\sum \$160.00 Filing Fee Certificate of Status Certified Copy of State	Fee, Certificate us & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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. Got Beach, LLC (Name of Foreign Limited Lia	bility Company)
Indiana (Jurisdiction under the law of which foreign limited liability company is organized)	20-3213994 (FEI number, if applicable)
4. 7/28/05 (Date of Organization) 5.	Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. n/a (Date first transacted business in Florid (See sections 608.501 & 608.502 F.S. to	da, if prior to registration.) o determine penalty liability)
7. 117 E. Spring Street, 5th Floor New Albany, IN 47150	OS AUG
(Street Address of 8. If limited liability company is a manager-managed co 9. The name and usual business addresses of the manag Adele E. Guarino-Sanders, Member	ompany, check here
10771 Isola Bella Court Miromar Lakes, Florida 33913	
 Attached is an original certificate of existence, no more than 90 day the jurisdiction under the law of which it is organized. (A photocopy is translation of the certificate under oath of the translator must be submitt Nature of business or purposes to be conducted or p 	s not acceptable. If the certificate is in a foreign language, a ted.)
JENGS	orized representative of a member. the execution of this document constitutes

J. Bradley Guarino-Sanders, Attorney and authorized representative

Typed or printed name of signee

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 Limite	d Liability Company	is:				
Got Beach, LLC					_	
2. The name and the Flori	da street address of th	ne registered agent a	and office are:			
Adele E. G	uarino-Sanders			SECR	05 AUG 15	
		(Name)		H.SOFF	G 15	Ξ
10771 isol	a Bella Court			710	Ŧ	E
	Florida Street Address	(P.O. Box <u>NOT</u> ACCE	PTABLE)	OF STATE FLORIDA	9: 29	
Miromar La	kes	FL 33913			_	
		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, Florida Statutes.

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

STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

GOT BEACH, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on July 29, 2005, and was in existence or authorized to transact business in the State of Indiana on August 11, 2005.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Eleventh Day of August, 2005.

TODD ROKITA, Secretary of State

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