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SEURETARY OF STATE FALLAHASSEE, FLORIDA

D. BRUCE
AUG 25 2011
EXAMINER

#### **COVER LETTER**

TO:

Registration Section

<sub>suвјест:</sub> GDK Partnership,	Name of Limited Liability Company	<del>-</del>		
	ciability Company for Authorization to Transact Business is above referenced foreign limited liability company to tra			
Please return all correspondence concerning this	matter to the following:			
Bruce McGonnigal				
	Name of Person			
GDK Partnership, LL	<u></u>			
	Firm/Company			
3224 S MacDill Ave	#129-316			
	Address			
Tampa, FL 33629				
	City/State and Zip Code	E		
hmcgonnigal@ea	gletransportation.com	E C	<b>~</b>	all confirma
E-mail addres	gletransportation.com s: (to be used for future annual report notification)	<u> </u>	AUG 21	
For further information concerning this matter, p	please call:	ARY OF	4-	
Pruse McConnidal	at (813 ) 944-3418	)F (		
Bruce McGonnigal Name of Person	Area Code & Daytime Telephone Number		E OF HE	
	•	DA AG	-1	
MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations			
Registration Section	Registration Section			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			
•	Tallahassee, FL 32301			
Enclosed is a check for the following am	nount:			
		e, Certificate		
Enclosed is a check for the following am  \$\sigm\\$	Fee & \$155.00 Filing Fee & \$160.00 Filing Fee			

### 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.	GDK Partnership, LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
	(Name of Poreign Limited Liability Company, must include Limited Liability Company, L.L.C., or L.C.)
ÇO	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written unsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C," "LLC.")
,	Delaware (Jurisdiction under the law of which foreign limited liability company is organized)  3. (FEI number, if applicable)
4.	January 4, 2002  (Date of Organization)  5. Perpetual (Duration: Year limited liability company will cease to
6.	exist or "perpetual")
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	3225 S MacDill Ave #129-316
	Tampa, FL 33629  (Street Address of Principal Office)
8.	If limited liability company is a manager-managed company, check here
9.	The name and usual business addresses of the managing members or managers are as follows:
	Bruce McGonnigal 3225 S MacDill Ave Tampa, FL 33629
	LORE STA &
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in purisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a instation of the certificate under eath of the translator must be submitted.)
11	. Nature of business or purposes to be conducted or promoted in Florida: General Business
	- Ben N'In
	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. I am aware that any 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 of signee

Bruce McGonnigal

## 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 C GDK Partnership, LLC	Company is:			
If unavailable, the alternate to be used i	in the state of Florida is:			
2. The name and the Florida street add	ress of the registered agent and office are:		<del></del>	<del></del>
Bruce McGonniga	(Name)	SEURE FALLAH	11 ÆU	
3225 S MacDill A	Ave # 129-316	TARY OF ASSEE, F	AUG 24 AH	
Florida Street  Tampa	t Address (P.O. Box <u>NOT</u> ACCEPTABLE)	STATE	H 🔁 37	O
Tampa	FL 33029 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.

Blu Ml

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

# Delaware

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#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GDK PARTNERSHIP, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF MAY, A.D. 2011.

3476856 8300

110490176

AUTHENTY CATION: 8792559

DATE: 05-26-11

You may verify this certificate online at corp.delaware.gov/authver.shtml