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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : HARVARD BUSINESS SERVICES, INC.

Account Number : 120080000045 Phone : (302)645-7400 Fax Number : (302)645-1280

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

ggmamerica@ymail.com

https://efile.sunbiz.org/scripts/efilcovr.exe

Foreign Limited Liability Company Green Gate America LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

B. BOSTICK

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

IN COMPLIANCE WITH SECTION 605 0902, FLORIDA STATUTES, THE POLLOWING IS SURMITTED TO RECESTER A FOREKEN LIMITED LIABILITY COMPANY TO TRANSACT RUSINESS IN THE STATE OF FLORIDA:

Green Gate America LLC
(Name of Foreign Limited Liability Company; must include "Tamited Liability Company," "LLC." or "LLC."
(It name transfields, enter alternate name adopted for the purpose of transacting business in Plottida. The alternate name must include "Limited Liability Company," "LL.C." or "LLC.")
2 Delaware
(Juristicing under the law of which foreign finited liability (FEI number,) supplies (FEI number,) s
4. No business transacted in Florida prior to registration
(Date first transacted business in Florida, if prior to registration) (See sequents 605,0904 & 605,0905, F.S. to defermine penalty liability)
5. 1680 Michigan Avenue, Suite 700
Miami Beach, FL 33139
(Street Address of Principal Office)
_{6.} 1680 Michigan Avenue, Sulte 700
Miami Beach, FL 33139
(Melling Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/arc:
Robert Mancini, Managing Member - President
1680 Michigan Avenue, Suite 700
Miami Beach, FL 33139
8. Admohed is an original certificate of existence, no more than 90 days old, duly authenticated by the official saving custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not to acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator intuit be submitted) Signature of an authorized person Signature of an authorized person of accordance with action 605 n293, P.S., the execution of this focument constitutes an efficient or under the results of paying that the facts wated hards are true. I an aware that my tube information obstituted in a decourant to the Department of Subsections in that depose releasy approvided for in a \$17 (55, P.S.)
Robert Mancini
Typed or printed name of signee

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:

Green Ga	te America Lt	_C		
if unavailable, the	sulternate to be used in	the state of Floridu is:		
2. The name and	the Florida succeaddre	ess of the registered agent and office are;	-	
F	Robert Manci	ni	en.s	
_		(Name)		ن
1680 Michigan Avenue, Suite 700			•	
Florida Struct Address (P.O. Box NOT ACCEPTABLE)				
N	/nami Beach	_{FI} 33139	<i>7</i> 2	قد ن سر د د
Clty/State/Zip		\sim	-74	
77 6 7			<u>u</u>	

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 bereby 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 605, Floridu Statutes.

(Signature)

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

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Delaware

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The First State

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

DELAWARE, DO HEREBY CERTIFY "GREEN GATE AMERICA 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 SECOND DAY OF MAY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GREEN GATE

AMERICA LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF APRIL, A.D.

2014.

5525910 8300

140556887

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

AUTHENTACATION: 1341203

DATE: 05-02-14

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CONSENT OF Green Gate America Inc. UNDER Florida Title XXXVI, Chapter 605,0112(b) TO USE OF SIMILAR NAME

Pursuant to Florida Title XXXVI, Chapter 605.0112(b) Green Gate America Inc. hereby consents to the registration with the Secretary of State of the State of Florida of Green Gate America LLC a foreign limited liability company to be formed under the laws of the State of Florida, and the use of the name Green Gate America LLC by said foreign general corporation.

Green Gate America Inc.

Signature and (Title)

Printed Nume: Robert MANCINI

Dated: April 25,2014.

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850-617-6381

5/5/2014 10:21:51 AM PAGE 1/001 Fax Server



May 5, 2014

FLORIDA DEPARTMENT OF STATE

Division of Corporations

HARVARD BUSINESS SERVICES, INC.

SUBJECT: GREEN GATE AMERICA LLC

REF: W14000028087

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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.

The document number of the name conflict is F10000004176.

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.

Barbara Bostick Regulatory Specialist II FAX Aud. #: H14000106305 Letter Number: 614A00009475

A HAY -5 AH II: 48
SECRETARY OF STATE
ALLAHASSEE, PLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314