M15000003134

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SECRETARY OF STAVE
ALLANIASSEE, FLORIDA

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:	Grey's A	uto Dream	LLC				
50225011		Name of I	Limited Liability Company				
The enclosed Existence, ar	l "Application by Fo nd check are submitte	reign Limited Liability ed to register the above	Company for Authorizat referenced foreign limite	ion to Transact Bused liability company	siness in Florida," Certificate y to transact business in Floric	of da.,	
Please return	all correspondence	concerning this matter	to the following:				
	Dwayn	e Grey					
	•		Name of Person				
	Grey's	Auto Dreai	m LLC				
			Firm/Company				
	9459 N W 42nd Street						
			Address				
	Sunrise	, FL 3335	1				
			City/State and Zip Code				
	dwayne	grey@gma	ail.com				
	 -	E-mail address: (to b	e used for future annual rep	ort notification)			
For further in	formation concernin	g this matter, please ca	II:				
D	wayne Gi	еу	at (954	980-551	6		
	Name o	f Contact Person	Area Code	Daytime Telep	phone Number		
Divi Regi P.O.	ILING ADDRESS: sion of Corporations istration Section Box 6327 ahassee, FL 32314	Di Re Cl 26	REET ADDRESS: vision of Corporations gistration Section ifton Building 61 Executive Center Circ liahassee, FL 32301	ele			
	a check for the f 125.00 Filing Fee	ollowing amount: \$\square\$ \$\square\$ \$130.00 Filing Fee Certificate of State	_		.00 Filing Fee, Certificate atus & Certified Copy		



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 24, 2015

DWAYNE GREY 9459 NW 42ND STREET SUNRISE, FL 33351

SUBJECT: GRAY'S AUTO DREAM LLC

Ref. Number: W15000013434

We have received your document for GRAY'S AUTO DREAM LLC and check(s) totaling \$105.00 of which \$105.00 has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$55.00 due. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not 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.

Tim Burch Regulatory Specialist II

Letter Number: 315A00003885

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Grey's Auto Dream LLC (Name of Foreign Limited Liability Company; must include "Lin	
(If name unavailable, enter alternate name adopted for the purpose of transactin Liability Company," "L.L.C," or "LLC.")	g business in Florida. The alternate name must include "Limited
₂ Missouri ₃ 47	7-2094947
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4	
(Date first transacted business in Florida, (See sections 605.0904 & 605.0905, F.S. to	it prior to registration.) determine penalty liability)
_{5.} 3135 Old Route 5, Unit 11	^{>} : : : : : : : : : : : : : : : : : : :
Camdenton, MO 65020	AHA PR
(Street Address of Prince	sipal Office) 기원 다 (기계 기계 기
6. 9459 N W 42nd Street	
Sunrise, FL 33351	LORN :
(Mailing Addr	ess)
7. The name, title or capacity and address of the person(s)	who has/have authority to manage is/are:
Dwayne Grey, Member	
9459 N W 42nd Street	
Sunrise, FL 33351	
8. Attached is an original certificate of existence, no more the having custody of records in the jurisdiction under the law of acceptable. If the certificate is in a foreign language, a translatust be submitted) Signature of an authority and accordance with section 605.0203, F.S., the execution of this document constitutes an aware that any false information submitted in a document to the Department of State of the Depar	orized person affirmation under the penalties of perjury that the facts stated herein are tn
Dwayne Grey	

Typed or printed name of signee

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.

_	of the Limited Liabili Nuto Dream I	· · · · · · · · · · · · · · · · · · ·			
If unavailable,	the alternate to be us	sed in the state of Florida is:			
2. The name a	and the Florida street	address of the registered agent and office are:	VITA	15 APR	entropy to
	Dwayne G	rey	1885 1885 1885	23	45E
		(Name)		\mathbb{R}	d E
9459 N W 42nd Street		TATE ACINO_	ր։ 2 8		
Florida Street Address (P.O. Box NOT ACCEPTABLE)					
	Sunrise	FL 33351 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 605, Florida Statutes.

(Signature)

\$ 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 MISSOURI



Jason Kander Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, JASON KANDER, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

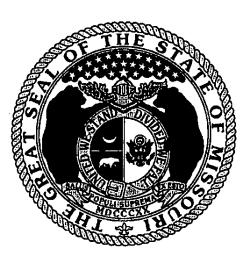
Grey's Auto Dream LLC LC001421877

was created under the laws of this State on the 13th day of October, 2014, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 16th day of April, 2015.

Secretary of State

Certification Number: CERT-04162015-0099



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