# M15000006386

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
	,	
(6:	hulChahaliZia (Dhan	- #\
(Cr	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
•	•	
Cartified Capies	Cortificator	of Status
Certified Copies	_ Cettilicates	S Of Status
<u> </u>		
Special Instructions to	Filing Officer 5	
		ı

Office Use Only



900274808559

08/03/15--01002--002 \*\*470.00

TO ACKNOWLEGGE SUFFICIENCY OF FILING

5 JUL 31 PM 3:56

2015 AUG 12 AM 9: 41

N. Culligan AUG 13 2015

### $SUNSHINE {\it corporate \& filing services, inc.}$

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

#### COVER LETTER DATE: 13-15 WALK IN

NAME: GL Consultants LLC
PLEASE FILE THE ATTACHED AND RETURN:
PLAIN COPY CERTIFIED COPY
CHECK # AMOUNT:155
PLEASE CONTACT TINA AT 850-508-1891 FOR FURTHER INFORMATION ON THIS MATTER!
THANK YOU SO MUCH!
TINA GOFF, PRESIDENT SUNSHINE CORPORATE & FILING SERVICES, INC.



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 12, 2015

SUNSHINE CORPORATE & FILING SERVICES, INC.

SUBJECT: GJL CONSULTANTS LLC

Ref. Number: W15000052116

We have received your document for GJL CONSULTANTS LLC and your check(s) totaling \$470.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 315A00016205

RECEIVED 15 AUG 12 PM 3x 37

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

(Name of Foreign Limited Liability Company; must include G L Consultants of New York LLC (Commonwealthin, enter alternate name adopted for the purpose of trans Liability Company, "LLC," or "LLC,")	"Limited Liability Company," "LLC," or "LLC")
G L Consultants of New York LLC  (If norms unavailable, exter alternate cause adopted for the purpose of trans	
(If some unavailable, enter alternate came adopted for the purpose of trens Liability Company," "LL-C," or "LL-C,")	
Liability Company," "L.L.C." or "L.L.C.")	acting business in Florida. The alternate name must include Limited
NT	•
New York  Underlied and on the low of which thereign limited liability  3	47-4308442
Combanh is difanjace) : Camen and in the control of	(FEI number, if applicable)
4	
(Dute Reat transacted huminess in Flor (See sections 603.0904 & 603.0903, P.S	els, if prior to registration.)
c/o Gerald Lezar, 75 East Brd Avenue, Apt. 17B	On additioning howers, restricted)
3.	
New York, NY 10028-7909	
(Street Address of Principal C	lfice)
6_c/o Gerald Lazar, 75 East End Avenu	ne, Apt. 17E
New York, NY 10028-7909	
(Mailing Address)	βο φατά το πορού το Το πορού το πορού τ Το πορού το πορού τ
	(A)
7. Name and street address of Florida registered agent; (P.O. Box 1	IOT acceptable)
Name: United Corporate Services, Inc.	
Office Address 9200 South Dadeland Bonlevard, Suite 50	) <b>8</b>
Mismi	- Anize
·	, Plorida _33156
(City) lugistated agent's acceptance:	(ZIp oods)
laving been named as registered agent and to accept service of prochis application, I hereby accept the appointment as registered agent with the provisions of all statutes relative to the propagated complete to obligations of my position as registered agent.    (User   A December 1)	and agree to not in this capacity. I further agree to comply performance of my duties, and I am funditor with end accept
(Registered agent's	algasitore)
. The name, title or capacity and address of the person(s) who has/ha	eve authority to manage is/arc:
etald Lezar, sole membar	• • •
Kest End Avenue, Apt. 17B	
sw York, NY 10028-7909	,

## State of New York Department of State State

I hereby certify, that G L CONSULTANTS LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 06/17/2015, and that the Limited Liability Company is existing so far as shown by the records of the Department.



201507310290 \* 37

Witness my hand and the official seal of the Department of State at the City of Albany, this 30th day of July two thousand and fifteen.

Anthony Giardina

Executive Deputy Secretary of State