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COVER LETTER

SUBJECT:	Gentique LLC Name of Limited Liability Company
	Name of Limited Liability Company
	ication by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all cor	respondence concerning this matter to the following:
	Gentique LLC Firm/Company
	Name of Person
	Gentique LLC
	Firm/Company
_	4920 Roswell RD NE 458-302
	City/State and Zip Code Gary Getz & Janos. com E-mail address: (d) be used for future annual report notification)
For further informati	ion concerning this matter, please call:
	Cyary Getz at (404) 310 - 7489 Name of Contact Person Area Code Daytime Telephone Number
	327 Clifton Building
Enclosed is a che □ \$125.00	cck for the following amount: Filing Fee

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

OREIGN LI	ANCE WITH SECTION 605.0902, FLORIDA STATUTES, I IMITED LIABILITY COMPANY TO TRANSACT BUSINESS	S IN THE STATE OF FLORIDA:
	Name of Foreign Limited Liability Company; must include "Limited	
(1)	Name of Foreign Limited Liability Company; must include "Limited	Liability Company," "L.L.C.," or "LLC.")
	ilable, enter alternate name adopted for the purpose of transacting buany," "L.L.C," or "LLC.")	isiness in Florida. The alternate name must include "Limited
Futor	n county GA 3. 45-	-5586257
urisdiction company is	organized)	(FEI number, if applicable)
,	9/1/15	
	(Date first transacted business in Florida, if pr (See sections 605.0904 & 605.0905, F.S. to deter	
······································	4920 Roswell RI) HE 45B-302
	Atlanta, GA 303	342 10ffice)
	(Street Address of Principal	Office)
	41920 Rosuell P	20 NE 45B-302 -1 11
<u> </u>	Atlanta, ErA ?	20 NE 45B-302 - 1 19 30342
		Old G
The nam	ne, title or capacity and address of the person(s) who	o has/have authority to manage is/are:
	Gans Getz - P	resident/Owner
	4920 Roswell 1	resident / Owner RD NE 45B-302
		034 <u>c</u>
ing custo	is an original certificate of existence, no more than ody of records in the jurisdiction under the law of w If the certificate is in a foreign language, a translation	90 days old, duly authenticated by the officia hich it is organized. (A photocopy is not
	Signature of an authoriz th section 605.0203, F.S., the execution of this document constitutes an affin a false information submitted in a document to the Department of State constitution.	rmation under the penalties of perjury that the facts stated herein are
	Gary Gebe	
	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.

1. The name of the Limited Liability Company is:	
Gentique LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	- · · · · · · · · · · · · · · · · · · ·
Lindsay Pisaotta	三道专用
185 Shurwood Forest Dr. Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Delray Beach FL 33445 City/State/Zip	- A. S.

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)

Secretary of State Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

DOCKET NUMBER:
CONTROL NUMBER:
DATE INC/AUTH/FILED:
JURISDICTION:
PRINT DATE:
FORM NUMBER:

150806K00 12053156 6/26/2012 GEORGIA 8/06/2015

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

GEMTIQUE LLC A DOMESTIC LIMITED LIABILITY COMPANY

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration-provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the abovenamed entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Brian P. Kemp Secretary of State