M15000006789

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	:
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Office Use Only



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115:45797

SEP - 1 2015 F. 1403/4PP (C)

COVER LETTER

TO:

Registration Section

Div	ision of Corporations		- <i>2</i> -			
SUBJECT:	GGS United LLC					
BODJECT.	Name of Limited Liability Company					
	d "Application by Foreign Limited Liability Comp and check are submitted to register the above refere					
Please return	all correspondence concerning this matter to the	following;				
	Brigham Gibbs					
	Name of Person					
	GGS United LLC					
	Firm/Company					
	2601 S Bayshore Dr, Suite 770					
	Address					
	Coconut Grove, FL 33133					
	City/St	ate and Zip Code				
	brigham@me.com					
	E-mail address: (to be used	for future annual report not	fication)			
For further in	nformation concerning this matter, please call:					
Bri	gham Gibbs	949 306-910 at ())1			
	Name of Contact Person	_ \	time Telephone Number			
Div Reg P.C	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 lahassee, FL 32314	Division of Registrati Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301			
	a check for the following amount: \$125.00 Filing Fee \$\square\$ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy			



RECEIVED 15 SEP - 1 PM 12: 24
SECRETART OF STATE TALLAHASSEE, FLORIDA

July 7, 2015

BRIGHAM GIBBS 2601 S BAYSHORE DR STE 770 COCONUT GROVE, FL 33133

SUBJECT: GGS UNITED LLC Ref. Number: W15000045791

We have received your document for GGS UNITED LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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.

Tammy Hampton Regulatory Specialist III

Letter Number: 015A00014171

IN FLORIDA

	ign Limited Liability Company; must include "Limit	ted Liability Company," "L.L.C.	" or "LLC.")
iability Company," "L.L.C,"	ternate name adopted for the purpose of transacting (business in Florida. The alternate	name must include "Limited
Delaware	3	(FEI number, if applic	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applic	able)
2601 S Bayshore Dr. S		termine penalty liability)	
Coconut Grove, FL 33			
2601 S Bayshore Dr. Su	(Street Address of Principal Office) aite 770		
Coconut Grove, FL 33			—
	(Mailing Address)		Se Se Se
. Name and street addres Name:	s of Florida registered agent: (P.O. Box NOT Brigham Gibbs	acceptable)	HAYSSET -
Office Address:	2601 S Bayshore Dr, Suite 770		E F CO
	Coconut Grove	, Florida	 39
Registered agent's accept	(City)	(Zip code)
his application, I hereby	Bailton	d agree to act in this capacity rformance of my duties, and	. I further agree to comply
	(Registered agent's signated and address of the person(s) who has/have		
Brigham Gibbs . Ma	ncity and address of the person(s) who has/have		
	ncity and address of the person(s) who has/have	authority to manage is/are:	

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.)

Brigham Gibbs

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "GGS UNITED 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 THIRD DAY OF AUGUST, A.D. 2015.

5732940 8300

151122505

Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 2611438

DATE: 08-03-15

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