

MI 5000 007487

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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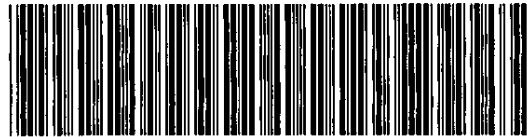
(Business Entity Name)

(Document Number)

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J SHIVERS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Grand Cru Management, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Robert Hanks

Name of Person

Grand Cru Management, LLC

Firm/Company

5051 Burning Tree Circle

Address

Stuart, FL 34997

City/State and Zip Code

rhanks1@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Hanks

617
at ()

510-9068

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

**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. Grand Cru Management, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Massachusetts 3. 03-0563757
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 1/1/2015
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 5051 Burning Tree Circle
Stuart, FL 34997
(Street Address of Principal Office)

6. 5051 Burning Tree Circle
Stuart, FL 34997
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Robert Hanks
Office Address: 5051 Burning Tree Circle
Stuart, Florida 34997
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Robert Hanks, Manager

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)



Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Robert Hanks

Typed or printed name of signee



William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

August 24, 2015

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of Limited Liability Company was filed in this office by

GRAND CRU MANAGEMENT, LLC
(ORGANIZED AS: GRAND CRU MANAGEMENT COMPANY, LLC)

in accordance with the provisions of Massachusetts General Laws Chapter 156C
on **June 21, 2005**.

I also certify that the following amendments to said Limited Liability Company have been filed:

Amendment Filed: September 1, 2005
Amendment Filed: January 29, 2009

I further certify that no other amendment to said certificate of organization has been filed; that, said Limited Liability Company has not filed a certificate of cancellation; that said Limited Liability Company has not been administratively dissolved; and that, so far as appears of record, said Limited Liability Company has legal existence.



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Francis Galvin
Secretary of the Commonwealth

Processed By:TAA

SEP 18 AM 7:06
SECRETARY OF STATE
COMMONWEALTH OF MASSACHUSETTS