

M1500000 8151

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

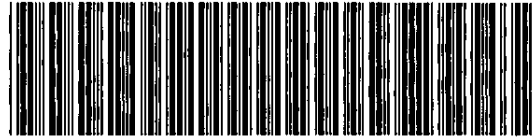
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000276882820

09/21/15--01039--013 \*\*125.00

FILED  
2015 OCT -6 AM 9:25  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

OCT 13 2015  
J. HARRIS

56827-911

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** TURNKEY GROUP, 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:

CARLOS H GIL  
Name of Person  
TURNKEY GROUP, LLC.  
Firm/Company  
3885 CANTERBURY WALK DR  
Address  
DULUTH, GA 30097  
City/State and Zip Code  
CGIL@turnkeyg.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CARLOS H GIL at ( 404 ) 557-1734  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 24, 2015

CARLOS H GIL  
3885 CANTERBURY WALK DR  
DULUTH, GA 30097

SUBJECT: GPI, LLC  
Ref. Number: W15000063835

RECEIVED  
15 OCT -6 PM 3:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for GPI, 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):

The alternate name that you have chosen is not available. Please select a new name.

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.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 815A00020229

FILED  
2015 OCT -6 AM 9:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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. Turnkey Group, LLC.  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")  
~~GA. LLC~~ Turnkey Group OF FL, 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. GA.  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 453141960  
(FEI number, if applicable)
4. N/A  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. ~~15 Forest Lane~~ 12850 W. STATE Rd 84 Lot # 8-20  
DAVIE, FL 33325  
(Street Address of Principal Office)
6. 3885 Canterbury Walk Dr  
Duluth. GA 30097  
(Mailing Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: ANG C. GIL

Office Address: ~~15 Forest Lane~~ 12850 W. STATE Rd 84 Lot # 8-20  
DAVIE, Florida 33325  
(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.

ANG C GIL  
(Registered agent's signature)

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

ANG C GIL, Manager of 15 Forest Ln,  
DAVIE, FL 33325  
Carlos H Gil CEO, 3885 Canterbury Walk Dr, Duluth. GA 30097

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)

Carlos H Gil  
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.

CARLOS H GIL  
Typed or printed name of signer

# STATE OF GEORGIA

## Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

### 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

**TURNKEY GROUP, LLC**

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below 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 above-named 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.

Docket Number	: 12095128
Date Inc/Auth/Filed	: 09/01/2011
Jurisdiction	: Georgia
Print Date	: 7/13/2015
Form Number	: 211



*B. P. Kemp*

Brian P. Kemp  
Secretary of State