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**3** MASON

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: GSP Busine	ess Alliance, LC Name of Limited Liability Company
The enclosed "Application by Foreign Limited I.	iability Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this	matter to the following:
Rocky Morga	Name of Person
GSP Busines	S Alliance LLC Firm/Company
23742 Pra	entation Palms Blvd.  Address
Land O'Lake	es FL 34639 City/State and Zip Code
dagmars more	gan a gephusinessalliance biz
For further information concerning this matter, pl	lease call:
Rocky Morgan Name of Sontact Person	at (423) 331-1351  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:  \$\Begin{align*} \Boxed{125.00} \text{Filing Fee} & \Boxed{18130.00} \text{Filing Fee} \text{Certificate of } \tex	

# 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: GSP Business · Alliance, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.") (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 "LI.C.") Stak of Tennessee (Jurisdiction under the law of which foreign limited liability 3. TV control # 715676
(FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) Zimmerman Dr. (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Registered agent's acceptance: 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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith 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: 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.

Kock more a



# STATE OF TENNESSEE Tre Hargett, Secretary of State

**Division of Business Services** William R. Snodgrass Tower 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

**GSP BUSINESS ALLIANCE, LLC** 

D. MORGAN 1645 ZIMMERMAN DR MORRISTOWN, TN 37814-6823 September 30, 2015

Request Type: Certificate of Existence/Authorization

Request #:

0176820

Issuance Date: 09/30/2015

Copies Requested:

**Document Receipt** 

Receipt #: 002255022

Filing Fee:

\$20.00

Payment-Check/MO - DAGMAR MORGAN, MORRISTOWN, TN

\$20.00

Regarding:

GSP Business Alliance, LLC

Filing Type:

Limited Liability Company - Domestic

Formation/Qualification Date: 04/09/2013

Status:

Active

Duration Term:

Perpetual

Business County: HAMBLEN COUNTY

Control #:

715676

Date Formed:

04/09/2013

Formation Locale: TENNESSEE

Inactive Date:

#### CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

### GSP Business Alliance, LLC

- \* is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- \* has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- \* has filed the most recent annual report required with this office;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Verification #: 013811924

Processed By: Nichole Hambrick