### Florida Department of State

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#### Foreign Limited Liability Company Gliding Grace, LLC

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MAR 2 4 2016

## H160000731803

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

	WITH SECTION 6030901, FLORIDA STATUTES, THE FOLLOWING IS SCHMITTED TO REGISTER A FO Y COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	MCION
	oreign Limited Liability Company; must include "Limited Liability Company," "LL.C.," or "LLC.")	
(If name unavailable consent of the mana Company," "L.L.C,	e, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the wagers or managing members adopting the alternate name. The alternate name must include "Limited Liability" "LLC.")	ni <del>ne</del> n Y
Delaware	81-0903819 3.	
(Jurisdiction unde company is orga	er the law of which foreign limited liability (FEI number, if applicable)	
4. Upon Filing		
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
3025 49th Ave. 5.	West, Bradenton, Florida 34207	
	(Street Address of Principal Office)	
	West, Bradenton, Florida 34207	
	(Mailing Address)	,
	tle or capacity and address of the person(s) who has/have authority to manage is/are:  Corbley Siller, 3025 49th Ave. West, Bradenton, Florida 34207	16 M
Trianger: XIII-		20
	Sin its second s	23
		ÁH
	;") . ; • • •	. 5
in the jurisdiction to	iginal cartificate of existence, no more than 90 days old, duly authenticated by the official having custody of sec when the law of which it is organized. (A photocopy is not acceptable. If the cartificate is in a foreign kingrage a tificate under onth of the translator must be submitted.)	ofts ယ
	Sheresa C. Silles	
-	Signature of an authorized person	
pen	accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the natities of perjury that the facts stated herein are true. I am aware that any false information submitted in a cument to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)  Theresa Corbley Siller	
	Typed or printed name of signee	

#### H160000731803

## 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.

Gliding Grace,	LLC	my is:	
If unavailable	e, the alternate to be used in the	state of Florida is:	
2. The name	and the Florida street address of	of the registered agent and office are:	
	Business Filings Incorporated	·	
		(Name)	
	1200 South Pine Island Road		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	Plantation	33324 FI.	
	City/Stote/Zip		- <u> </u>
Itability comp registered ag statutes relati	omy at the place designated in the ent and agree to uct in this capaing to the proper and complete p	o accept service of process for the above his certificate, I hereby accept the appoin city. I further agree to comply with the p performance of my duties, and I am famili tered agent as provided for in Chapter 60	tment as: rovisions of all ar with and
	Natel		
	(Signa Mark Williams, A.V.P., Business F	•	
	\$ 100.00 \$ 25.00 \$ 30.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional)	

5.00 Certificate of Status (optional)

# Delaware

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GLIDING GRACE, 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 SEVENTEENTH DAY OF MARCH, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5913820 8300 SR# 20161703604 You may verify this certificate online at corp.delaware.gov/authver.shtml Authentication: 201998363

Date: 03-17-16