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(((H17000029792 3)))



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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : INCORP SERVICES INC

Account Number : 120120000007

; (702)866-2500

Fax Number 1 (702)866-2689

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please, **

Email Address: documents@incorp.com

Foreign Limited Liability Company Cee Gee Cee LLC

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February 1, 2017

INCORP SERVICES INC

SUBJECT: CEE GEE CEE LLC

REF: W17000009179

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORRECTED

2017 FEB - 2 A 9: 32
SLORGIVEY OF SIATE ORIDA

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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.

The registered agent must sign accepting the designation.

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 FAX Aud. #: H17000029792 Letter Number: 417A00002015

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER.

TO:	Registration Section Division of Corporation	n s						
CUBI	gerr.	Cee G	ee Cee LLC					
SUBJ	EC1:	Name of	Limited Liability	Company	×-			
The en	elosed "Application by For nce, and check are submitte	eign Limited Liability Comp d to register the above refen	pany for Authoris	zation to Trun ilted liability o	sect Business i company to tra	n Florida," nsact busin	Certifica cas in Fig	ue of oride.,
Please	return all correspondence c	concerning this matter to the	following:					
			Mia Conner			50	25	
	, "-"-"-"-"-"-"-"-"-"-"-"-"-"-"-"-"-"-"-	N	ame of Person				\equiv	
		InCon	p Services, In	C.		AHAS	EB.	_
		F	rm/Company				-2	The second
		3773 Howard H	ughes Pkwy,	Suite 500S	;		\triangleright	Ë
Address			٠.					
		Las Vega	s, NV 89169-	6014		D _A	32	
		Ciry/S	tate and Zip Cod	le				
		docume	nts@incorp.co	om				
		E-mail address: (to be used	for future annu.	al report notif	ication)			
For fur	ther information concerning	g this matter, please call:						
N		InCorp Services, Inc.	_ at800		6-2677			
	Name o	Contact Person	Anga Cod	e Dnyti	me Telephone	Number		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tailuhassee, FL 32314			Division of Registratio Clifton Bui	lding itive Center Ci	rcle		
Enclos	ed is a check for the follow	ing amount: □ \$130.00 Filling Fee &	■ \$155.00 Fil	ing Fee &	□ \$160.00 Fill	ing Fee, Ce	rtificate	

of Status & Certified Copy

Certified Copy

Certificate of Status

To: 8506176383

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIS

			Cee Gee Cee LLC			
Farma unavellable es	Foreign Limited	Liability Company:	must include "Limited Liability	Company."	C." or "I.I.C.")	
ishility Company," "L	nor alternate name.fC."	e adopted for the pur)	rprise of transacting business in F	lorida. The altern	ate name must include "Limited	
De	laware		3, 27-1373373			
[Jurisdiction under the company is presented	: law of which for :d)	reign limited liability	(FI	I number, I/ uppl	lcubic)	
		Upon Re	alstration			
	(See a	ne first transacied bu	egistration siness in Florida, il prior to regid 605,0905, F.S. to determine peun	ration.) Ity lighility)	7. 23	
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Miam! Beach		(Sirest Address	33139 of Principal Office)		Fig 7	-
50 South P	ointe Drive #2		or trinopar order		SER ~	
						·
Miami Beach	<u>_</u>	FL HALIN	ng Address)		- F	•
		•	,		ORIGINA ORIGINA	
Name and street ac	<u>idress</u> of Florida		(P.O. Box NOT acceptable)		5m ~	
Name:		InCorp Sen	/ices, inc.		<i>F</i>	
Office Addre	.rs:	17888 67th C	ourt North			
		Loxahatd	heeFlo	33470		
		(City		(Zip co	da)	
esignated in this app	lication, I here visions of all si	tby accept the appointable relative to it as registered ages	service of process for the about the interest agent a the proper and complete perful. Mig. Conner on but the control of the conner on but	end agree to accommon of my	in this capacity. I further a duties, and I am familiar wi	gree
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	- "	50 South Polr	ite Drive #2103 Miami Be	acn FL	33137	`
	- "	50 South Poir	NG DAVE #2103 MISMI BE	den FL	33137	`
	- "	50 South Poir	NA DRVA #2103 MIAMI BE	acn FL		`
	- "	50 South Pair	IIB DRVB #2103 MIZMI BE	ucn FL	33137	`
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<u>Delaware</u>

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CEE GEE CEE 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 TWENTY-FIFTH DAY OF JANUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHE GEE CEE LLC"
WAS FORMED ON THE TWENTY-FIFTH DAY OF NOVEMBER, A.D. 2009.

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

4757674 8300 SR# 20170442951

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

MSQC.

Authentication: 201929918

Date: 01-25-17

