

(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:

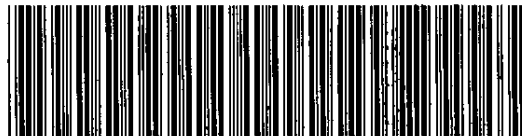
780

W16-44347

707

37.50

Office Use Only



800286369448

06/20/16--01090--017 \*\*87.50

02/23/17--01025--002 \*\*37.50

FEB 23 2017  
S. YOUNG

SECRETARY OF STATE  
ITALY  
16 JUN 20 AM 10:42



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 14, 2016

DEAN M WALLACE  
1228 EAST 7TH AVENUE  
TAMPA, FL 33605

SUBJECT: GLAUBEN BESITZ, LLC  
Ref. Number: W16000044347

We have received your document for GLAUBEN BESITZ, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

We have received your document for GLAUBEN BESITZ, LLC and check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$37.50. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

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.

Shelia H Young  
Regulatory Specialist II

Letter Number: 116A00013067

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
15 JUN 20 AM 10:42

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Glauben Besitz, 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:

Dean M. Wallace

Name of Person

Glauben Besitz, LLC

Firm/Company

9441 Kingfisher PL

Address

Sebring, FL 33875

City/State and Zip Code

dwallace@stromling.com

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

For further information concerning this matter, please call:

Dean M. Wallace

727 at (            )

230-8840

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

10 JUN 20 AM 10:42

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FL 32303

**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. Glauben Besitz, 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. \_\_\_\_\_ 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 7/2015  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 400 N. Ashley Drive  
Tampa, FL 33602  
(Street Address of Principal Office)

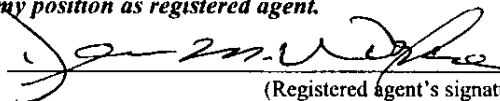
6. 9441 Kingfisher Place  
Sebring, FL 33875  
(Mailing Address)

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

Name: Dean M. Wallace  
Office Address: 9441 Kingfisher Pl  
Sebring, Florida 33875  
(City) (Zip code)

**Registered agent's acceptance:**

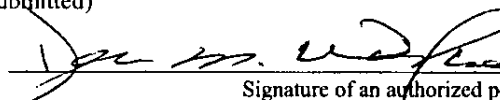
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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:

Martin Ellis, CEO/Chairman - 400 N. Ashley Drive, Suite 2600, Tampa, FL  
Anthony Telemacque, Secretary - 400 N. Ashley Drive, Suite 2600, Tampa, FL  
Maricris Shuman, Treasurer - 400 N. Ashley Drive, Suite 2600, Tampa, FL

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.

Dean M. Wallace  
Typed or printed name of signee

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
16 JUN 20 AM 10:42

## **Glauben Besitz, LLC. Directors**

**Title Director**

**The Gerauer Family Trust**  
1228 East 7th Ave.  
Tampa, FL 33605

**Title Director**

**The Lo-Key Family Trust**  
1228 East 7th Ave.  
Tampa, FL 33605

**Title Director**

**The Wallace Family Trust (Dean M. Wallace)**  
1228 East 7th Ave.  
Tampa, FL 33605

**Title Director**

**The Ellis Family Trust**  
1228 East 7th Ave.  
Tampa, FL 33605

**Title Director**

**The DeGenius Family Trust**  
1228 East 7th Ave.  
Tampa, FL 33605

**Title Chief Operating Officer (COO)**

**Robert Crewe**  
1228 East 7th Ave.  
Tampa, FL 33605

18 JUN 20 AM 10:42  
STOKES  
TALLAHASSEE, FL

**STATE OF WYOMING**  
**Office of the Secretary of State**

I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

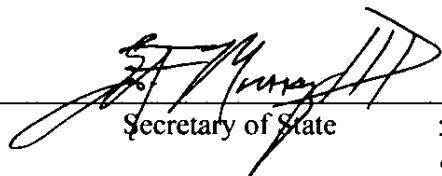
**Glauben Besitz, LLC**  
is a  
**Limited Liability Company**

formed or qualified under the laws of Wyoming did on **November 18, 2014**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2014-000675923**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 17th day of June, 2016 at 2:18 PM. This certificate is assigned 020409526.



  
Secretary of State

16 JUN 20 AM 10:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA