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(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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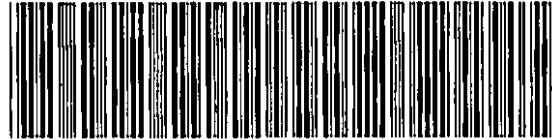
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Certificates of Status _____

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~~MI7 - 91327~~

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Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 15, 2017

ADONIS MALLIOS
311 HAYWOOD DR
PARAMUS, NJ 07652

SUBJECT: GDSA FLORIDA LLC
Ref. Number: W17000091327

We have received your document for GDSA FLORIDA LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 517A00023198

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TALLAHASSEE FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GDSA FLORIDA 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:

ADONIS MALLIOS

Name of Person

GDSA FLORIDA LLC

Firm/Company

311 HAYWOOD DR

Address

PARAMUS, NJ 07652

City/State and Zip Code

ADONISMALLIOS@GMAIL.COM

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

For further information concerning this matter, please call:

ADONIS MALLIOS

212

531-4481

at ()

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

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. GDSA FLORIDA 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. NEW YORK 3. 81-5335818
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. _____
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 7610 NW 205 STREET 6. 311 HAYWOOD DR PARAMUS NJ 07652
(Street Address of Principal Office) (Mailing Address)
- STARKE, FL 32091

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

Name: ADONIS MALLIOS

Office Address: 7610 NW 205 STREET

STARKE, Florida 32091
(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)

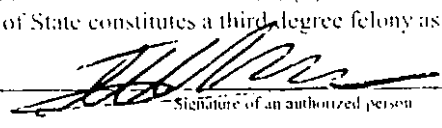
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>MANAGING MEMB</u>	<u>ADONIS MALLIOS</u>		
	<u>7610 NW 205 STREET</u>		
	<u>STARKE, FL 07310</u>		
	<u>7610 NW 205 STR</u>		
	<u>STARKE FL</u>		
	<u>32091</u>		

(Use attachments if necessary)

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)

10. 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.


(Signature of an authorized person)

ADONIS MALLIOS

(Typed or printed name of signer)

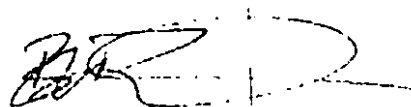
State of New York
Department of State } ss:

I hereby certify, that GDSA FLORIDA LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 02/13/2017, and that the Limited Liability Company is existing so far as shown by the records of the Department.

I further certify, that no other documents have been filed by such Limited Liability Company.

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8:49

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 24th day of October two
thousand and seventeen.*



*Brendan W. Fitzgerald
Executive Deputy Secretary of State*