

M17 000010324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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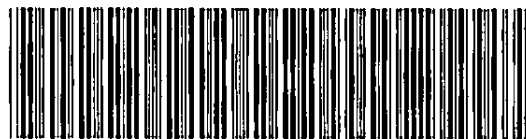
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

17 DEC -6 AM 7:49

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: GUEST SERVICES GROUP 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:

KELLY EPLEY  
Name of Person

GUEST SERVICES GROUP LLC  
Firm/Company

6770 PARKER FARM DRIVE SUITE 103  
Address

WILMINGTON NC 28405  
City/State and Zip Code

KEPLEY@NEVERSTOPSS.COM

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

For further information concerning this matter, please call:

AL MORELL

Name of Contact Person

at ( 407 ) 467-3118

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:

GUEST SERVICES GROUP 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. NORTH CAROLINA

(Jurisdiction under the law of which foreign limited liability company is organized)

3.

82-2942588

(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. 6770 PARKER FARM DR. SUITE 103

(Street Address of Principal Office)

6.

(Mailing Address)

WILMINGTON NC

28405

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

Name:

KELLY EPLEY

Office Address:

245 CITRUS TOWER BLVD SUITE 201

CLERMONT

Florida

34711

(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.

Kelly Epley  
(Registered agent)

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

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

MEMBER

6770 PARKER FARM DR  
WILMINGTON NC  
SUITE 103 28405

MANAGING MEMBER

KELLY EPLEY  
6770 PARKER FARM DR. STE 103  
WILMINGTON NC 28405

MEMBER

245 CITRUS TOWER BLVD  
SUITE 201  
CLERMONT FL 34711

MANAGING MEMBER

AL MORELL  
245 CITRUS TOWER BLVD SUITE 201  
CLERMONT FL 34711

(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

AL MORELL

Typed or printed name of signer

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

17 DEC -6 AM 7:49



# NORTH CAROLINA

## Department of the Secretary of State

### CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

### GUEST SERVICES GROUP LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 27th day of September, 2017, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 6th day of November, 2017.

*Elaine F. Marshall*

Secretary of State