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(Global Products Group LL C CORPORATE NAME AND DOCUMENT #)
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COVER LETTER

Division of Corporation	ons						
SUBJECT: GLOB	AL PRODUCTS	GROUI	OLL	·c			
	Name of Limited Liability Company						
The enclosed "Application by Fo Existence, and check are submitted."	oreign Limited Liability Comp ed to register the above refer	pany for Authoriza enced foreign limi	tion to Tra ted liabilit	ansact Business in Florida," Certificate of y company to transact business in Florida			
Please return all correspondence	concerning this matter to the	following:					
	John	Buckma	47				
Name of Person							
Buckman Group-Corpurate Coursel							
Firm/Company							
Brukman Group-Corporak Councel Firm/Company 11 S. Rassaic Are, Second Fl. Address							
Address							
Chatham NJ 07528 City/State and Zip Code							
City/State and Zip Code							
E-maily address: (to be used for future annual report notification)							
	E-mail address: (to be used	l for future annual	report not	ification)			
For further information concerning	ng this matter, please call:						
John	Buckman of Contact Person	al (973	, 7	52-9193			
Name (of Contact Person	Area Code	Day	time Telephone Number			
MAILING ADDRESS: Division of Corporation: Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle cc, FL 32301			
Enclosed is a check for the follow	ving amount:						
□ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy			

TO:

Registration Section

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

IN COMPILANCE 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 Global Products Group LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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.")
A/T
2. (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 11 S. Passaic Are, 2nd Floor
Che than NJ 07928 (Street Address of Principal Office)
(Street Address of Principal Office)
6. Il S. Massaic Ave., and Floor
Chatham, NJ 07928
(
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Gene Weitz
Office Address: 1200 - Manual Place - Manual Product 13760 Reptron Blyd
Tampa , Florida 33626 (City) (Zip code)
(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 complywith 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.
NRAI Service-Inc.
By:
(Registered agent's Egnature)
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Gene Weitz, manager, 13760 Reption Blud, Tampa, PL 33626
Kyle Benus, manager, 11 5 Passaic Ave., Lad Fl., Chatham, NO 0797
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)
- Dra All -
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.
Typed or printed name of singles

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

GLOBAL PRODUCTS GROUP LLC

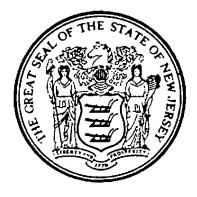
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I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on March 25, 2018.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

BUCKMAN GROUP - CORPORATE COUNSEL 11 S. PASSAIC AVENUE 2ND FLOOR CHATHAM, NJ 07928



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 3rd day of May, 2018

State of Men

Elizabeth Maher Muoio State Treasurer

Certificate Number: 6088015008

Verify this certificate online at

https://www.l.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp