M1800005472

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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FALLAHASSEE, FLORIDA

111/1/00/12010



May 24, 2018

PEARL G ALIMO 15820 PINYON LANE JACKSONVILLE, FL 32218 US

SUBJECT: GREIGHT COMPANY LIMITED

Ref. Number: W18000049582

We have received your document for GREIGHT COMPANY LIMITED and your check(s) totaling \$125.00. 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 the corrected original and one copy of 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.

Janeice L Smith
Regulatory Specialist II
Registration Section

Letter Number: 418A00010863

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JENSTER OF STREET

COVER LETTER

GREIGHT COMPA	ANY LIMITED			
	Name o	of Limited Liability	Company	,
The enclosed "Application by For Existence, and check are submitte	eign Limited Liability Co d to register the above ref	mpany for Authoriz erenced foreign lim	ration to T	ransact Business in Florida," Certificate of ity company to transact business in Florida.
Please return all correspondence of	oncerning this matter to the	he following:		The state of the s
PEARL G. ALI	МО			
		Name of Person		
Greight Compa	nny, LLC			
		Firm/Company		
15820 PINYON	LANE			
		Address	-	
JACKSONVILL	E, FLORIDA.32218			
	City/s	State and Zip Code		
ALIMO.PEARL@	GMAIL.COM			
	E-mail address: (to be use	d for future annual	report not	tification)
For further information concerning	this matter, please call:			
PEARL ALIMO		757754549i	E 757754	15498
Name of 0	Contact Person		Day	time Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division on Registration Clifton Bud 2661 Execution Division Control of the Contr	ADDRESS: of Corporations on Section uilding cutive Center Circle ce, FL 32301
Enclosed is a check for the following ☐ \$125.00 Filing Fee (amount: 1\$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Certified Copy	Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

	NY LIMITED . L.L.C				
(Name of Foreig	on Limited Liability Company; must include "	Limited Liability Company," "LLC.," or "LLC	10)		
ALCON COMPANY	, LLU.				
STATE OF OHIO	name adopted for the purpose of transacting busines	s in Florida. The alternate name must include "Limited	Liability Company," "L.L.C." or "L.		
	which foreign limited liability company is organized)	3			
	conpany is organized)	(FEI nu	unber, if applicable)		
	(Date first transacted business in Plants in				
15820 PINYON LAN	(Date first transacted business in Florida, if pi (See sections 605,0904 & 605,0905, F.S. to c	rior to registration.) letermine penalty limbility)			
(Street Address of	Principal Office)	6. 15820 PINYON LANE			
JACKSONVILLE, FLORIDA. 32218			(Mailing Address) JACKSONVILLE, FLORIDA, 32218		
		THE TOTAL PLOP	RIDA. 32218		
Vame and street addres	ss of Florida registered agent: (P.O. I	Box NOT assessed N			
Name:	PEARL G. ALIMO	Box NOT acceptable)			
			<u>ڪ</u>		
Office Address:	15820 PINYON LANE		ž		
	JACKSONVILLE	22040	9.		
istered agent's accept	/Cin 3	, Florida 32218	<u> </u>		
	of my position as registered agent.	. 1			
	· · · · · · · · · · · · · · · · · · ·	* 1			
-	(Registered agen	t's signature)			
The name, title or canac	(Registered agen	· ·			
The name, title or capac Title or Capacity:	ity and address of the person(s) who	has/have authority to manage is/are:			
	ity and address of the person(s) who Name and Address:	· ·	Name and Address:		
The name, title or capac Title or Capacity: MANAGER	ity and address of the person(s) who	has/have authority to manage is/are:	Name and Address:		
	ity and address of the person(s) who Name and Address: PEARL ALIMO	has/have authority to manage is/are:	Name and Address:		
MANAGER	Name and Address: PEARL ALIMO 15820 PINYON LANE JACKSONVILLE, FLORIDA 32218	has/have authority to manage is/are:	Name and Address:		
MANAGER	PEARL ALIMO 15820 PINYON LANE JACKSONVILLE, FLORIDA 32218 MAXWELL ALIMO	has/have authority to manage is/are:	Name and Address:		
	Name and Address: PEARL ALIMO 15820 PINYON LANE JACKSONVILLE, FLORIDA 32218	has/have authority to manage is/are:	Name and Address:		
MANAGER TRAINER	MAXWELL ALIMO 15820 PINYON LANE MAXWELL ALIMO 15820 PINYON LANE JACKSONVILLE, FLORIDA 32218	has/have authority to manage is/are:	Name and Address:		
MANAGER RAINER attachments if necessar	MAXWELL ALIMO 15820 PINYON LANE JACKSONVILLE, FLORIDA 32218 MAXWELL ALIMO 15820 PINYON LANE JACKSONVILLE, FLORIDA 32218	has/have authority to manage is/are: Title or Capacity:			
MANAGER FRAINER attachments if necessar inched is a certificate of	PEARL ALIMO 15820 PINYON LANE JACKSONVILLE, FLORIDA 32218 MAXWELL ALIMO 15820 PINYON LANE JACKSONVILLE, FLORIDA 32218 Y)	has/have authority to manage is/are: Title or Capacity:			
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UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show GREIGHT COMPANY LIMITED, an Ohio For Profit Limited Liability Company, Registration Number 2022127, was organized within the State of Ohio on May 18, 2011, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 17th day of May, A.D. 2018.

Ohio Secretary of State

for Hasted

Validation Number: 201813701618