MECCOCO6549

| (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: | | | | | |
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June 22, 2018

GEORGE KUNKEL 9031 NW 21 CT CORAL SPRINGS, FL 33071

SUBJECT: GALLOWAY HOLDINGS, LLC

Ref. Number: W18000058202

We have received your document for GALLOWAY HOLDINGS, 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):

A certificate of existence or a certificate of good standing, dated no more than 90' days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Dionne M Scott Regulatory Specialist II

Letter Number: 318A00013041

www.sunbiz.org

COVER LETTER

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| TO: Registration Section Division of Corporations | | | | | |
|---|--|--|--|--|--|
| SUBJECT: GAlloway Holdings LLC Name of Limited Liability Company | | | | | |
| The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certifica 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: | | | | | |
| George Kunkel | | | | | |
| Galloway Holdings LLC Firm/Company | | | | | |
| 9031 NW 21 Ct Address | | | | | |
| Co19/ SPLINGS FC 3307/ City/State and Zip Code | | | | | |
| Grail address: (to be used for future annual report notification) | | | | | |
| For further information concerning this matter, please call: | | | | | |
| 6EOR6E KUNKEL at (754) 217-8807 Name of Contact Person Area Code Daytime Telephone Number | | | | | |
| MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301 | | | | | |
| Enclosed is a check for the following amount: \$\Begin{array}{c c c c c c c c c c c c c c c c c c c | | | | | |

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

| | TION 605.0902, FLORIDA STATUTES, THE FO ISINESS INTHE STATE OF FLORIDA: | OLLOWING IS SUBMITTED TO REGIST. | ER A FOREIGN LIMITED LIABILITY |
|--|--|--|-----------------------------------|
| | ay /oldings LLC | - | |
| (Name of Foreign | Limited Liability Company, must include "Limited | d Liability Company," "L.L.C.," or "LLC.") | |
| (If name unavailable, enter alternate n | ame adopted for the purpose of transacting business in Flor | | |
| 2. Delaware (Jurisdiction under the law of w | nich foreign limited liability company is organized) | 3. <u>83-062432</u> (Fill numb | er, if applicable) |
| 4. | (Date first trensacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determi | registration.) me penalty liability) | |
| s. 9031 NW | 21 1- | 6. SAME (Mailing Add | |
| COAL SPE | Principal Office) | (Mailing Add | (ces) |
| 3307/ | | | |
| 7. Name and street address | ss of Florida registered agent: (P.O. Box | NOT acceptable) | |
| Name: | GEDGE KUNKOL | | |
| Office Address: | Goral SPRINGS | | |
| | Coral SPRINGS | . Florida 330フ | / |
| designated in this applica to comply with the provise | tance: egistered agent and to accept service of p stion, I hereby accept the appointment a ions of all statutes relative to the proper s of my position as registered agent. | s registered agent and agree to act | in this capacity. I further agree |
| | (Registered agent's | signature) | |
| 8. The name, title or capa <u>Title or Capacity:</u> | acity and address of the person(s) who ha Name and Address: | as/have authority to manage is/are: Title or Capacity: | Name and Address: |
| Asidal- | 600 be Kunkoi 9031 NW 21 Ct COM SFRING FL 3367 | | |
| | | | |
| (Use attachments if neces | sary) | _ | |
| | of existence, no more than 90 days old, of which it is organized. (If the certificat abmitted) | | |
| | uted in accordance with section 605.020. the Department of State constitutes a th | | |
| | //-//W/Signature | of an authorized person | |
| | GERGE KUN | k:F7 | |

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GALLOWAY HOLDINGS, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE ELEVENTH DAY OF JULY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GALLOWAY HOLDINGS, LLC" WAS FORMED ON THE SIXTEENTH DAY OF MAY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 203045610

Date: 07-11-18

6888974 8300 SR# 20185612385