

# M18000007790

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

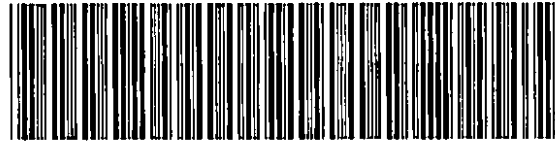
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**FILED**  
2018 AUG 23 PM 1:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N CULLIGAN

AUG 24 2018

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Lady Grace Interiors, LLC  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Kim Meadows  
Name of Person  
Lady Grace Interiors  
Firm/Company  
11165 Lord Taylor Drive  
Address  
Jacksonville, FL 32246  
City/State and Zip code  
Lady grace interiors@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kim Meadows at (904) 240-2825  
Name of Person Area Code Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 6, 2018

KIM MEADOWS  
11165 LORD TAYLOR DRIVE  
JACKSONVILLE, FL 32246

SUBJECT: LADY GRACE INTERIORS, LLC  
Ref. Number: W18000071142

*copy*

We have received your document for LADY GRACE INTERIORS, LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The wrong filing form was submitted. I am enclosing the proper form. Note the additional filing fee of \$55.00. I have retained your certificate.

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) 245-6052.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 318A00016116

2018 AUG 23 AM 10:43  
P.O. BOX 6327  
TALLAHASSEE, FL 32314

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Lady Grace Interiors, LLC  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. South Carolina 3. 82-1565087  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 5/24/17 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 11165 Lord Taylor Drive, Jacksonville, FL 32246  
(Principal office address)

11165 Lord Taylor Drive (same)  
(Current mailing address, if different)

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

Name: Kim Meadows

Office Address: 11165 Lord Taylor Drive  
Jacksonville, Florida 32246  
(City) (Zip code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**9. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation 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.*

Kim Meade

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: n/a

Address: \_\_\_\_\_

Vice Chairman: n/a

Address: \_\_\_\_\_

Director: n/a

Address: \_\_\_\_\_

Director: n/a

Address: \_\_\_\_\_

**B. OFFICERS**

President: owner/managing member: Kim Meadows

Address: 11165 Lord Taylor Drive

Jacksonville, FL 32246

Vice President: (same)

Address: \_\_\_\_\_

Secretary: (same)

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Kim Meadows  
Signature of Director or Officer

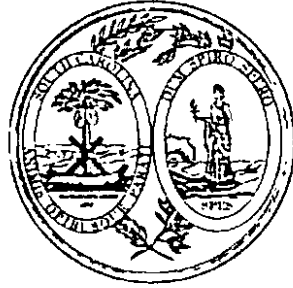
The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Kim Meadows, owner/managing member.

(Typed or printed name and capacity of person signing application)

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2018 AUG 23 PM 1:21  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

# *The State of South Carolina*



*Office of Secretary of State Mark Hammond*

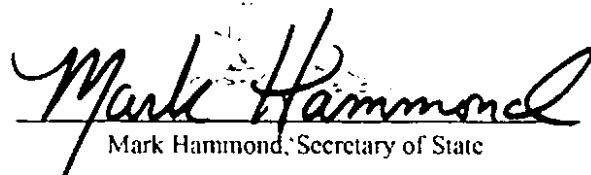
## **Certificate of Existence**

**I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:**

**LADY GRACE INTERIORS LLC,**

a limited liability company duly organized under the laws of the State of South Carolina on May 24th, 2017, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal  
of the State of South Carolina this 27th day  
of July, 2018.

  
Mark Hammond, Secretary of State