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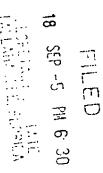
(Red	questor's Name)	
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(City	//State/Zip/Phone	e #)
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(Bus	siness Entity Nar	me)
(Dox	cument Number)	
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COVER LETTER

то:	Registration Section Division of Corporations						
SUBI	Finishline Logistics, LLC						
.,003.	Name of Limited Liability Company						
	losed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of te, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida						
Please	eturn all correspondence concerning this matter to the following:						
	Gerson Hernandez						
Name of Person							
	General Corporate Services Inc.						
Firm/Company							
	829 W. Palmdale Blvd, Suite 68						
Address							
	Palmdale CA 93551						
City/State and Zip Code							
gerson@generalcorporate.com							
	E-mail address: (to be used for future annual report notification)						
For fur	ner information concerning this matter, please call:						
	Gerson Hernandez 661 310 2823						
	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						
Enclos	d is a check for the following amount: □ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee. Certificate of Status Certificate of Status Certified Copy 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:

1. Finishline Logistics, LLe	С							
	gn Limited Liability Comp	any; must include	"Limited Liab	ility Compa	ny," "L.L.C.," o	or "LLC.")		
(If name unavailable, enter alte Liability Company," "L.L.C,"		e purpose of transa	acting business	in Florida.	The alternate na	nne must ii	nclude "I	Limited
2. Georgia		3,						
(Jurisdiction under the law o company is organized)	f which foreign limited liab	bility		(FEI num	ber, if applicabl	e)		
4. Upon Filing						_		
	(Date first transacte (See sections 605.090	d business in Flori 4 & 605.0905. F.S	ida, if prior to i i, to determine	registration. nenalty liab) ility)			
5. 4021 McGinnis Ferry R				,,,,,,,		_		
Suwanee, GA, 30024, U						_		
		lress of Principal (Office)					
6. 4021 McGinnis Ferry Ro	d, Apt #2038	==				_		
Suwanee, GA, 30024, U	ISA							
	(2	Mailing Address)						
7. Name and street address	of Florida registered ag	ent: (P.O. Box]	<u>NOT</u> accepta	ble)				
Name:	REGISTERED AGE	ENTS INC.					18	
Office Address:	3030 N. Rocky F	oint Drive, S	TE 150A			三	SEP -5	TI
	TAMPA			, Florida	33607	-	1_	
		City)		_	(Zip code)		S	m
Registered agent's accepts Having been named as reg this application, I hereby a with the provisions of all st the obligations of my positi	istered agent and to acc ccept the appointment a atutes relative to the pro	is registered age oper and comple	nt and agree ete performan	to act in th ace of my a	his capacity. I	further o m familia	igreØlo ir willoo 🗀	comply and accept
		(Registered agent	t's signature)					
8. The name, title or capac	ity and address of the po	erson(s) who has	/have authorit	ty to manaj	e is/are:			
Henry Paul Regan Jr Ma	nager - 4021 McGinnis I	Ferry Rd. Apt #2	2038. Suwane	c. GA, 300	124. USA			
<u></u>								
					_			
9. Attached is a certificate of jurisdiction under the law of the translator must be sub-	f which it is organized. (
•	V S	ignature of an auth	norized person			<i>-</i> -		
This document is executed is submitted in a document to	in accordance with section the Department of State (on 605.0203 (1) (constitutes a thire	(b), Florida St d degree felor	tatutes. I ar ny as provi	n aware that ar ded for in s.81	ny false in 7.155. F.S	formatic	on
	Boh Lambert - Authoriz		=	•				

Typed or printed name of signee

Control Number: 18040924

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

FinishLine Logistics LLC a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 16131222 Date Inc/Auth/Filed: 04/03/2018 Jurisdiction : Georgia Print Date : 09/04/2018

Form Number 211



Brian P. Kemp Secretary of State