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SUNSHINE CORPORATE FILING OF FLORIDA INC.

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3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 10-15-18	**WALK IN**
ENTITY NAME Gypsy Soul Ro	
DOCUMENT NUMBER	
PLEASE FILE THE ATT	ACHED AND RETURN
Plain Copy	
XX Certified Copy Certificate of Status	
PLEASE OBTAIN THE FOLLOW	NG FOR THE ABOVE ENTITY
Certified Copy of Arts & Ame	ndments
Certificate of Good Standing	
** <u>A</u> POSTILLE' / NOTAR	VAL CERTIFICATION **
TOTAL OWED 1555	снеск #5343
Please call Tina at the above number for any is	sues or concerns, Thank you so much!

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. Gypsy Soul Ranch, LLC

(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC." or "LLC.")

	thich foreign henced lability company is organized)	· · · · · · · · · · · · · · · · · · ·	
An	thes receipt intered and the company is organized)	(FE: mumber, if applicable)	
	Upon Filing		
	(Da., in it summeren outness at Florida, if prior to regista (See sections 605.0904 & 605.0905, F.S. to dearraine per	ntion.) nalty änhflity)	_
10760 W Highway 32		6. 10760 W Highway 326	
(Strent Address of		(Mailing Address)	
Ocala, FL 34482-1139	l	Ocala, FL 34482-1139	50
			r 9,
Name and street addre	53 of Florida registered agent: (P.O. Box <u>N</u>	<u>)T</u> acceptable)	15
Name and <u>street addre</u> Name:	ss of Florida registered agent: (P.O. Box <u>NC</u> United Corporate Services, Inc.	<u>)T</u> acceptable)	
		<u>)T</u> acceptable)	
Name:	United Corporate Services, Inc.	<u>)T</u> acceptable) , Florida 33156	15 E

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 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.

lii (Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:	Name and Address:	<u>Title or Capacity:</u>	Name and Address:
Manager Member/Prs	Michael Salvadore 10760 W Highway 326 Ocala, FL 34482	<u> </u>	

(Use attachments if necessary)

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)

10. 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.

Ĉ. Signature of an authorized person

Lawrence C. Franco, Esq.

Typed or privated name of signee

<u>Delaware</u>

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GYPSY SOUL RANCH, 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 OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GYPSY SOUL RANCH, LLC" WAS FORMED ON THE TWELFTH DAY OF JULY, A.D. 2018.

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



Authentication: 203594511 Date: 10-11-18

6972598 8300 SR# 20187100372

You may verify this certificate online at corp.delaware.gov/authver.shtml

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