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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

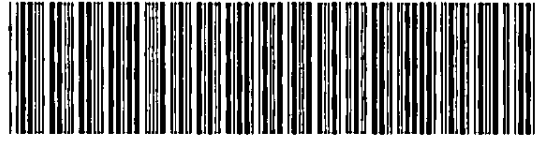
(Business Entity Name)

(Document Number)

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S. PRATHER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GateHouse Business Solutions LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of 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:

Brandon Blocker

Name of Person

GateHouse Business Solutions LLC

Firm/Company

11827 Skylake Place

Address

Temple Terrace, Florida 33617

City/State and Zip Code

accounting@ghbsonline.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brandon Blocker

at (609)

7849173

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

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

STREET ADDRESS:

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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$160.00 Filing Fee, Certificate 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. GateHouse Business Solutions LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

GateHouse LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")

2. Texas
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 83-1710435
(FEI number, if applicable)

4. 10/25/2018
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 5601 Bridge Street
(Street Address of Principal Office)
SUITE 300
Fort Worth, Texas 76112

6. 700 Lavaca Street
(Mailing Address)
SUITE 1401
Austin, Texas 78701

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

Name: Brandon Blocker

Office Address: 11827 Skylake Place

Temple Terrace, Florida 33617
(City) (Zip code)

Registered agent's acceptance:

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.


(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

Manager Name: Brandon Blocker

Member Address: 11827 Skylake Place

Authorized Temple Terrace, Florida 33617

Person _____

Other _____ **Other** _____

Title or Capacity: **Name and Address:**

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ **Other** _____

Manager Name: Robert Carter

Member Address: 601 Apollo Court

Authorized Granbury, Texas 76049

Person _____

Other _____ **Other** _____

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ **Other** _____

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ **Other** _____

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

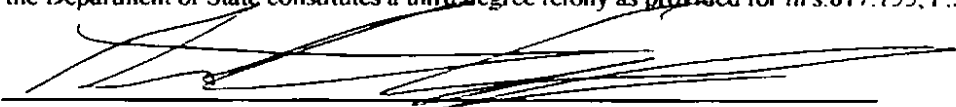
Other _____ **Other** _____

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 OFFICE OF STATE
 CLERK

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.



Signature of an authorized person

Robert Carter

Typed or printed name of signer



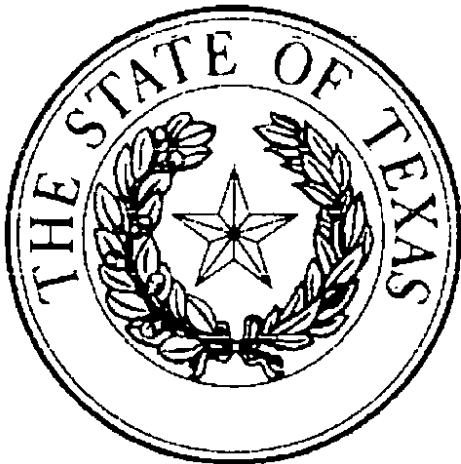
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for GateHouse Business Solutions LLC (file number 803101889), a Domestic Limited Liability Company (LLC), was filed in this office on August 26, 2018.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 21, 2019.



A handwritten signature in black ink, appearing to read "David Whitley".

David Whitley
Secretary of State