(Requestor's Name) (Address) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL	
(Address) (Address) (City/State/Zip/Phone #) (City/State/Zip/Phone #)	
(Address) (City/State/Zip/Phone #) (City/State/Zip/Phone #) (City/State/Zip/Phone #)	
(Address) (City/State/Zip/Phone #) (City/State/Zip/Phone #)	
	00
(Business Entity Name)	Ĩ .
Certified Copies Certificates of Status	n 2
Special Instructions to Filing Officer:	
W19-32361	
Office Use Only	

B. BRUCE MAY 1 3 2019



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 18, 2019

GREG PYLE 27317 NW 78TH AVE HIGH SPRINGS, FL 32643

SUBJECT: GB PYLE HOLDINGS LLC Ref. Number: W19000032361

We have received your document for GB PYLE HOLDINGS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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) 245-6842.

Deborah Bruce Corporate Records Supervisor II

Letter Number: 519A00007867.

2019

HAY

ີພ

မှု

www.sunbiz.org



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 30, 2019

GREG PYLE 27317 NW 78TH AVE HIGH SPRINGS, FL 32643

SUBJECT: G & B HOLDINGS LLC Ref. Number: W19000032361

We have received your document for G & B HOLDINGS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are nonlonger acceptable : "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is L11000033077.

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) 245-6842.

Deborah Bruce Corporate Records Supervisor II



•

COVER LETTER



Registration Section TO: **Division of Corporations**

G & B Holdings, LLC

SUBJECT:

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:

Greg Pyle Name of Person G & B Holdings, LLC Firm/Company 27317 NW 78th Ave Address HAY 13 High Springs, FL 32643 City/State and Zip Code cgog.ap@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 386 454-2329 Greg Pyle at (Daytime Telephone Number Area Code Name of Contact Person **STREET ADDRESS:** MAILING ADDRESS: **Division of Corporations** Division of Corporations **Registration Section Registration Section Clifton Building** P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301 Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE **\$155.00** Filing Fee & S125.00 Filing Fee □ \$130.00 Filing Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy

Certified Copy

Certificate of Status

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:

L G & B HOLDINGS		· · · · · · · · · · · · · · · · · · ·					_	
100 0.10 1	sign Limited Liability Company; must						_	
(If name unavailable, enter altern	ate name adopted for the purpose of transac	ting business in Florida. The a	iternate name must include	"Limited Liability Co	mpany," "L.L.)	С," от "Ю	I.C.")	
NEVADA		3	83-2893263					
2. {Jurisdiction under the law	of which foreign limited liability company is	organized)		(FEI number, if applicable)				
4	(Date first transported business in	Florida, if prior to penstration	- <u></u>					
	(Date first transacted business in (See sections 605.0904 & 605.0	905, F.S. to determine penalty	liability)					
	AVE STE 111 NO 1071	6.	27317 NW 78TH					
5 (Street Addres	s of Principal Office)	_ 0.		(Mailing Address)			_	
LAS VEGAS, NV	89117		HIGH SPRINGS.	FL 32643				
		_					_	
		_				2019		
7. Name and street ad	dress of Florida registered age	nt: (P.O. Box NOT :	acceptable)				ŢŢ.	
· · · · · · · · · · · · · · · · · · ·			1 /			ū		
	Greg Pyle				· • • • •	"3d		
Name:					j. Gi	122 	5 - 8 1999-04-14 2 - 8	
Office Addre	27317 NW 78th Ave					: 34	×-,*	
	High Springs			2643				
		(Cuy)	, Florida _	(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:	<u>Title or Capacity:</u>		Name and Address:
Manager	Name: GREG PYLE	Manager	Name:	
Member	Address: 4465 W SAHARA AVE	Member	Address:	
Authorized	STE 111 NO 1071	Authorized		
Person	LAS VEGAS, NV 89117	Person		
Other	Other	Other	·	Other
Manager	Name:	🗍 Manager	Name:	
Member	Address: 4465 W SAHARA AVE	Member		
Authorized	STE 111 NO 1071	Authorized		
Person	LAS VEGAS, NV 89117	Person		
Other	Other	Other		
Manager	Name:	Manager	Name:	
Метьет	Address:	Member	Address:	
Authorized		Authorized		9
Person		Person		
Other	Other	Other		Other

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.

Situature of an authorized person
Brittany HUFFMan
Typed or printed name of signee

• • • •

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **G & B HOLDINGS L.L.C.**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since December 20, 2018, and is in good standing in this state.



Electronic Certificate Certificate Number: C20190506-1394 IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on May 6, 2019.

Barbara K. Cegarste

Barbara K. Cegavske Secretary of State