

M190000010509

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

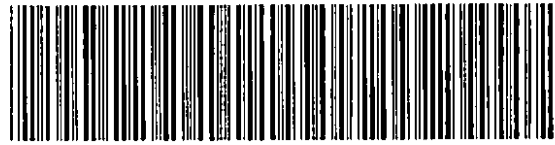
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2019 OCT 31 11:10:49

2019 OCT 31 11:11:07

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NOV 01 2019

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 030540 8257319

AUTHORIZATION :

COST LIMIT : \$125.00

ORDER DATE : October 31, 2019

ORDER TIME : 9:56 AM

ORDER NO. : 030540-020

CUSTOMER NO: 8257319

FOREIGN FILINGS

NAME: GJC FUNDING II, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER: _____

2019 OCT 31 11:10:49

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GJC Funding II, 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:

Peggy Cassin

Name of Person

Global Jet Capital

Firm/Company

83 Wooster Heights Road, Suite 503

Address

Danbury, CT 06810

City/State and Zip Code

pcassin@globaljetcapital.com

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

For further information concerning this matter, please call:

Peggy Cassin

203

448-4459

at (_____) _____

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

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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. GJC Funding II, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 84-3516881
(FEI number, if applicable)

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

5. 83 Wooster Heights Road, Suite 503
(Street Address of Principal Office)

6. 83 Wooster Heights Road, Suite 503
(Mailing Address)

Danbury, CT 06810

Danbury, CT 06810

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(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.

By: Corporation Service Company
(Registered agent's signature)

Lydia Cohen
Asst. Vice President

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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: Shawn Vick

☐ Member Address: 83 Wooster Heights Rd, #503

☐ Authorized Danbury, CT 06810

Person _____

☒ Other President ☐ Other _____

☒ Manager Name: Vivek Kaushal

☐ Member Address: 83 Wooster Heights Rd, #503

☐ Authorized Danbury, CT 06810

Person _____

☒ Other Vice President ☐ Other _____

☒ Manager Name: Christopher Paul

☐ Member Address: 83 Wooster Heights Rd, #503

☐ Authorized Danbury, CT 06810

Person _____

☒ Other Vice President ☒ Other Secretary

Title or Capacity: Name and Address:

☐ Manager Name: James Noonan

☐ Member Address: 83 Wooster Heights Rd, #503

☐ Authorized Danbury, CT 06810

Person _____

☒ Other Vice President ☐ Other _____

☐ Manager Name: David Labrozzi

☐ Member Address: 83 Wooster Heights Rd, #503

☐ Authorized Danbury, CT 06810

Person _____

☒ Other Vice President ☐ Other _____

☒ Manager Name: Susan Marr

☐ Member Address: 83 Wooster Heights Rd, #503

☐ Authorized Danbury, CT 06810

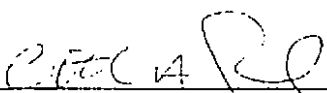
Person _____

☐ 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.



Signature of an authorized person

Christopher Paul

Typed or printed name of signer

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GJC FUNDING II, 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 THIRTY-FIRST DAY OF OCTOBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GJC FUNDING II, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF OCTOBER, A.D. 2019.

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

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Jeffrey W. Bullock, Secretary of State

7675991 8300

SR# 20197832467

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

Authentication: 203905909

Date: 10-31-19