M20000 00 6339

(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:
Permission from Mr. Rogers to

Office Use Only

FEZN# 7/24/20



400347281924

UA/20/20--01006 -033 **160.00

RECEIVED
JUL 1 3 2020

SB/ND



336 South Service Road Melville, NY 11747

July 9, 2020

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

To Whom it May Concern,

Grace Civil LLC intends to register with the Fjorida Department of State to conduct business within the State of Florida. Attached is our cover letter with our company information and our application by foreign limited liability company for authorization to transact business in the State of Florida.

In lieu of the requested certificate of existence, we've included Grace Civil LLC's Articles of Organization, Certificate of Good Standing, and Certificate of Formation, as we do not have a Certificate of Existence. If these documents will not suffice, please contact Bill Rogers at 516-336-6720.

A check is also included to cover the \$100 Filing Fee for Application, the \$25 Designation of Registered Agent, the \$30 Certified Copy, and the \$5 Certificate of status for a total of \$160,00.

If anything else is required, or you have any questions or concerns, please contact Bill Rogers at 516-336-6720.

Thank you,

Hannah Law

Haugland Group LLC

020 J J 13 Ali

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COVER LETTER

TO:

Registration Section

SUBJECT: _	Grace Civil LLC		_
	N.	ame of Limited Liability Company 	
The enclosed Existence, and	"Application by Foreign Limited Liabili I check are submitted to register the abo	ty Company for Authorization to Transact Business in Florida ve referenced foreign limited liability company to transact bus	," Certificate o iness in Florida
Please return :	all correspondence concerning this matte	 er to the following: 	
	William Rogers		
		Name of Person	_
	Grace Civil LLC	'	
		Firm/Company	-
	336 South Service Road	1	
		Address	-
	Melville, NY 11747		
		City/State and Zip Code	-
	brogers@hauglandllc.com		
	E-mail address: (to	be used for future annual report notification)	-
For further inf	ormation concerning this matter, please	call:	267
William Rogers		516 336-6720	2020 13
	Name of Contact Person	Area Code Daytime Telephone Number	_
Mailing Address:		Street Address:	
Registration Section		Registration Section	<u>.</u>
Division of Corporations		Division of Corporations	<u>.</u>
P.O. Box 6327		The Centre of Tallahassee	63
I atta	ahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Please	osed is a check for the following amount e make check payable to: FLORIDA D 25.00 Filing Fee S130.00 Filing Certificat	EPARTMENT OF STATE	

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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate	name adopted for the purpose of transacting busine	ess in Florida. The alternate name r	nust include "Limited Liability C	Company," "L.L.C," or "LLC
New York		6609205		
(Jurisdiction under the law of which foreign limited liability company is		3	(FEI number, if applicable)	
N/A - no previous bus	iness conducted in Florida			
	(Date first transacted business in Florida, if (See sections 605.0904 & 605.0905, F.S. to	orior to registration.) determine penalty liability)		
Grace Civil LLC		Grace Civi 6.		
reet Address of Principal Office)		(Mailing	; Address)	·
336 South Service Road		336 South	336 South Service Road	
Melville, NY 11747		Melville, N	NY 11747	2020
Name and street address	s of Florida registered agent: (P.O	Box NOT acceptable)		. :
Name:	William Haugland			AH 10: 50
Office Address:	2669 South Bayshore Drive, Apt	PH2N 		0
	Miami .		33133	

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.

(Régistered 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: Title or Capacity: Name and Address: Name: _ Matthew Pirozzi Name: William J Haugland □Manager □ Manager Address: ___ ☐ Member □ Member Address: __ Merrick, NY 11566 2669 South Bayshore Drive Apt PH2N Authorized \square Authorized Miami, FL 33133 Person Person Treasurer

Other_ President □Other_ Other____ □Other____ □Manager Name: _____ □Manager Name: _____ Address: □ Member □Member Address: □ Authorized □ Authorized Person Person Other □Other □Other_ Other____ □Manager Name: □ Manager □Member Address: _____ ☐ Member Address: □ Authorized ☐ Authorized 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. Nonindexed 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. William J Haugland

Typed or printed name of signee



Government of The United States Virgin Islands

-0-

Office of the Lieutenant Governor Division of Corporations & Trademarks

CERTIFICATE OF FORMATION

To Whoin These Presents Shall Come:

I, the undersigned Lieutenant Governor the United States Virgin Islands, do hereby certify that **GRACE CIVIL LLC** a **Domestic Limited Liability Company,** has filed a(n) **Articles of Organization** in the Office of the Lieutenant Governor the requisite documents to become a domestic business entity as set forth by the Virgin Islands Code, and the Rules and Regulations of this Office.

Wherefore, the persons who have duly executed the articles, and their successors, shall, from the date of the aforementioned filing, be a domestic business entity in fact and in law, known by the name stated in the formation documents, and by such name shall have succession for the time stated in such documents.

Registration Date: April 03, 2019

COVERNMENT OF THE SOURCE OF TH

Witness my hand and the seal of the Government of the United States Virgin Islands, on this 4th day of April, 2019.

Tregenza A. Roach
Lieutenant Governor

United States Virgin Islands



Government of The United States Virgin Islands

-()-

Office of the Lieutenant Governor
Division of Corporations & Trademarks

CERTIFICATE OF GOOD STANDING

To Whom These Presents Shall Come:

I, the undersigned Lieutenant Governor the United States Virgin Islands, do hereby certify that **GRACE CIVIL LLC** has filed in the Office of the Lieutenant Governor the requisite annual reports and statements as required by the Virgin Islands Code, and the Rules and Regulations of this Office. In addition, the aforementioned entity has paid all applicable taxes and fees to date, and has a legal existence not having been cancelled or dissolved as far as the records of my office show.

Wherefore, the aforementioned entity is duly formed under the laws of the Virgin Islands of the United States, is duly authorized to transact business, and, is hereby declared to be in good standing as witnessed by my seal below. This certificate is valid through June 30th, 2021

Entity Type: Domestic Limited Liability Company

Entity Status: Active/In Good Standing

Registration Date: 04/03/2019

Jurisdiction: United States Virgin Islands, United States

Witness my hand and the seal of the Government of the United States Virgin Islands, on this 1st da \overline{y}_{∞} of July, 2020.

Tregenza A. Roach Lieutenant Governor

Treggy A. Rouli

United States Virgin Islands





THE UNITED STATE'S VIRGIN ISLANDS

USVI Lieutenant Governor Filed: April 03, 2019 10:30 AM BID: DC0102928

Articles of Organization

GRACE CIVIL LLC (DC0102928)

General Details

Handling Option

24 Hour Priority Handling

Delayed Effective Date

Type of Limited Liability

Limited Liability Company

Company

Proposed Company Name

Select a Reserved Name

No

GRACE CIVIL LLC

Business Mailing Addresses

Principal Office or Place of

Business

Parcel No. 18a Estate Havensight, Charlotte Amalie, United States Virgin

Islands, 00802, United States

Mailing Address

P.O. Bóx 11309, Charlotte Amalic, United States Virgin Islands, 00801,

United States

Business Details

Term

Perpetual

Nature of Business/Purpose

Other, Other

Additional Purpose Details:

Other

Amount of Capital

1.000.00

Managed By

Member Managed

Members Liability

Members are not liable

Resident Agent in USVI

Resident Agent Type Registered Business Entity

Entity Name MARJORIE RAWLS ROBERTS, PC

Business Identifier 561277,

Physical Address 5093 Dronningens Gade, Ste. 1, Charlotte Amalie, United States Virgin

Islands, 00802, United States

Mailing Address Po Box₁6347, Charlotte Amalie, United States Virgin Islands, 00804,

United States

Resident Agent Consent Form Grace Civil LLC - Resident Agent Form.pdf04/03/2019 10:29 AM

Organizers

Individual

Name Mrs. Marjorie Rawls ROBERTS Esq

Status Active

Physical Address 5093 Dronningens Gade, Ste. 1, Charlotte Amalie, United States Virgin

Islands, 00802, United States

Mailing Address P.O. Box 6347, Charlotte Amalic, United States Virgin Islands, 00804.

United States

Managers/Members

Registered Business Entity

Entity Name REGIS HOLDINGS LLC

Business Identifier 588783
Status Active

Physical Address 5093 Dronningens Gade, Suite 1, Charlotte Amalie, United States Virgin

Islands, 00802, United States

Mailing Address P.O. Box 6347. Charlotte Amalie, United States Virgin Islands, 00804,

United States

Position Member

Signature(s)

Name

Position

Date

I DECLARE, UNDER PENALTY OF PERJURY, UNDER THE LAWS OF THE UNITED STATES VIRGIN ISLANDS, THAT THIS OFFICER HAS AGREED BY RESOLUTION TO THE CHANGES MADE IN THIS APPLICATION.

Mr. Marjorie Rawls ROBERTS Esq

Organizer

04/03/2019

Yes

Daytime Contact

Name

Telephone

Email

I DECLARE, UNDER
PENALTY OR PERJURY,
UNDER THE LAWS OF THE
UNITED STATES VIRGIN
ISLANDS THAT ALL
STATEMENTS CONTAINED
IN THIS APPLICATION, AND
ANY ACCOMPANYING

KNOWLEDGE THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE

DOCUMENTS, ARE TRUE AND CORRECT, WITH FULL

SUBJECT TO INVESTIGATION AND THAT

ANY FALSE OR DISHONEST

ANSWER TO ANY

QUESTION MAY BE GROUNDS FOR DENIAL,

SUBSEQUENT REVOCATION OF REGISTRATION, OR

OTHER FINES AND

PENALTIES PURSUANT TO THE FRAUDULENT CLAIMS Mrs. Marjoric Rawls Roberts Esq.

(1) 340-776-7235

jorie@marjorierobertspc.com

Yes

2020 JUL 13 MAID: 4

STATUTE AS SET FORTH IN 14 V.I.C. § 843.

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