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TO:

TO:	Registration Section Division of Corporation	ns				
SUBJI	EMERALD LEAF					
		Name of	Limited Liability	Company		
		reign Limited Liability Comp ed to register the above refer				
Please	return all correspondence	concerning this matter to the	following:			
	ARMANI GAI	LEED				
		N	ame of Person			
	EMERALD LEAF LLC.					
8121 Tumblestone Court Apt 936						
			Address			
	Delray Beach.					
		City/S	tate and Zip Code			
	emeraldleaflic@	gmail.com				
		E-mail address: (to be used	d for future annual	report no	tification)	
For fur	ther information concerning	g this matter, please call:				
	Armani Galeed		954 at (669-25		
	Name o	of Contact Person	Area Code	Day	time Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section duilding ecutive Center Circle see, FL 32301	
Enclos	ed is a check for the follow ■ \$125,00 Filing Fee	ing amount: S130.00 Filing Fee & Certificate of Status	S155.00 Filin Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Ce of Status & Certified Cop	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 6/5/0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

EMERALD LEAF LLC	gn Limited Liability Company; must include	le "Limited Liability Company," "L.I.	С.," от "LL.	
EMERALD LEAF PAINT	• • • •			
	ternate name adopted for the purpose of tran	sacting business in Florida. The alter	nate name mi	ast include "Limited
GEORGIA		83-3413681		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if ap	plicable)	
1. N/A				
···	(Date first transacted business in FI (See sections 605.0904 & 605.0905, F	orida, if prior to registration.) S. to determine penalty liability)		
5. 3713 Oakland Dr Savar				
	(Street Address of Principa	ıl Office)		
6. 3713 Oakland Dr Savan	nnah, GA 31404			
	(Mailing Address	(s)	den rill	
7 Name and areast address	s of Florida registered agent: (P.O. Bo	v NOT accentable)		des Ses
/. Name and street addres		(NOT acceptable)		2 11
Name:	Armani Galeed		5	Alian marina process
Office Address:	8121 Tumblestone Court APT 936			
	Delray Beach	, Florida <u>33446</u>	.m	8 =
Registered agent's accep	(City)	(Zip o	ode) g	
designated in this applica- to complywith the provision	gistered agent and to accept service of tion, I hereby accept the appointment ons of all statutes relative to the proper my position as registered agent	as registered agent and agree to a	ict in this co	apacity. I further agree
	(Registered ag	ent's signature)		
8. The name, title or capa Owner	acity and address of the person(s) who h	nas/have authority to manage is/ard	2:	
9. Attached is a certificate jurisdiction under the law of the translator must be so	of existence, no more than 90 days old of which it is organized. (If the certifical ubmitted)	, duly authenticated by the official ate is in a foreign language, a trans	having cus slation of the	tody of records in the e certificate under oath
	()			
	Signature of an a	nuthorized person		
This document is executed submitted in a document to	d in accordance with section 605.0203 (to the Department of State constitutes a t	1) (b), Florida Statutes. I am aware hird degree felony as provided for	e that any fa in s.817.15	lse information 5, F.S.
	Typed or printed			

Control Number: 18094672

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFIED COPY

I. Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that the attached documents are true and correct copies of documents filed with the Corporations Division of the Office of the Secretary of State of Georgia under the name of

EMERALD LEAF LLC a Domestic Limited Liability Company

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence of the existence or nonexistence of the facts stated herein.

Docket Number : 19614317
Date Inc/Auth/Filed: 07/25/2018
Jurisdiction : Georgia
Print Date : 09/21/2020

Form Number : 215



Brad Rafforsperger

Control Number: 18094672

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF ORGANIZATION

I, Brian P. Kemp, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

EMERALD LEAF LLC

a Domestic Limited Liability Company

has been duly organized under the laws of the State of Georgia on 07/25/2018 by the filing of articles of organization in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on 08/06/2018.



Brian P. Kemp Secretary of State