M2000011439

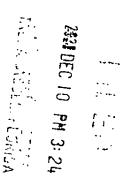
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W2000016192

Office Use Only



800352192138

16/62/26--01022--007 **180.00



12/10/20/



October 9, 2020

SHANNON STAHLIN 315 W. HURON STE 240 ANN ARBOR, MI 48103

SUBJECT: GINAS GETAWAY LLC Ref. Number: W20000116192

We have received your document for GINAS GETAWAY LLC and your check(s) totaling \$130.00. 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 no longer 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 L18000210945.

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) 245-6051.

Yvette Scott Document Specialist II

Letter Number: 120A00019830

EM POWER ING # A HER ICA'S # ENTREPRENEURS

Exitta Cerporation

315 Most Ecros, Setts 240

Aus Arber, AU 48103

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

October 26, 2020

Re: Ginas Escapes and Getaways

Dear Sir or Madam:

Enitia Corporation has been authorized by Regina Dumas to file the enclosed Registration for Ginas Escapes and Getaways .

If you need any additional information, you can reach us at

1-877-281-6496 (toll free) documents@directincorporation.com

We have enclosed an additional \$5.00 for one "Certificate of Status". For your convenience, I have enclosed a self-addressed envelope.

Thank you,

Enitia Corporation

RECEIVED TOTAL

COVER LETTER

	Ginas Getaways LLC				
BJECT:	Nam	ne of Limited Liability Company			
a anglesad		Company for Authorization to Transact Business in	12) 11 (17)		
istence, an	d check are submitted to register the above	referenced foreign limited liability company to trai	n riorida. Certi nsact business in		
ease return	all correspondence concerning this matter	to the following:			
	Shannon Stahlin				
	151	Name of Person			
	Direct Inc.		~ 5		
		Firm/Company			
	315 W Huron Ste 240				
		ان س			
		Address	-0		
	Ann Arbor, MI 48103		모		
		City/State and Zip Code	·		
	documents@directincorp.com	Enty/state and Zip Code	## }		
	E-mail address: (to b	e used for future annual report notification)			
or further in	formation concerning this matter, please ca	ill:			
Sha	annon Stahlin	877 281-6496			
	Name of Contact Person	at ()	land on		
	Name of Confact (Cison	Area Code Daytine Telephone P	vumoer		
	ling Address:	Street Address:			
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Box 6327		The Centre of Tallahassee			
Tall	ahassee, FL 32314	2415 N. Monroe Street, Suite 810			
		Tallahassee, FL 32303			
Encl	osed is a check for the following amount:				
	se make check payable to: FLORIDA DEF		llian Cas Camifi		
C) 3	125.00 Filing Fee == \$130.00 Filing Fe		iling Fee, Certifi us & Certified C		

APPLICATION BY FOREIGN LÍMITED 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

"Limited Liability Company," "L. L. C," or "L.L.C.") (FEI number, if applicable)
(FEI number, if applicable)
DEC 10 PH 3:
DEC 10 PH 3:
DEC 10 PH 3:
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24 24 24
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540
Zip code)

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

Fitle or Capacity:	Name and Address:	Title or Capacit	y: Name and Address:
□Manager	Regina Dumas Name:	□Manager	Name:
■ Member	425 Kent Dr Apt 4 Address:	□Member	Address:
□Authorized	Bellefontaine, OH 43311 US	□Authorized	<u> </u>
Person		Person	
⊒Other	Other	□Other	Other_
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address: #
□Authorized		□Authorized	3. 2 <u>1</u>
Person		Person	خت
Other	Other	□Other	□Other
□Manager	Name:	□Manager	Name:
⊒Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	Other

10. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any false information

Signature of an authorized person

submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155. F.S.

of the translator must be submitted)

Shannon Stahlin

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show GINAS GETAWAYS LLC, an Ohio For Profit Limited Liability 2 Company, Registration Number 4208777, was organized within the State of Ohio on July 12, 2018, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 23rd day of November, A.D. 2020.

1 John

Ohio Secretary of State

Validation Number: 202032804260