M2100003670

(Requestor's Name)						
(Address)						
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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ	GiveLoveGetHelp, LLC ECT:				
		Name of Limited Liability Company	•		
		ility Company for Authorization to Transact Business in Florida, bove referenced foreign limited liability company to transact busi			
Please	return all correspondence concerning this ma	tter to the following:			
	Ron Gutman				
		Name of Person			
	GiveLoveGetHelp, LLC				
Firm/Company					
12775 Pachwood Road Address					
	North Pal	n Beach City/State and Zip Code n @ givelove gethelp.org to be used for future annual report notification)			
For fu	rther information concerning this matter, pleas	se call:			
Ron Gutman		650 804-6492 at ()			
	Name of Contact Person	Area Code Daytime Telephone Number			
Mailing Address: Registration Section Division of Corporations		Street Address: Registration Section Division of Corporations			
	P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the following amout Please make check payable to: FLORIDA ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Certifice	DEPARTMENT 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 LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: GiveLoveGetHelp, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.") (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 "L.C.") 3. 86-1724539 (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 6. 12775 Packwood Road
North Palm Beach 12775 Packwood Road North Palm Beach FLORIDA 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Ron Gutman Name: 12775 PACKNOOD ROAD NORTH PALM BEACH Florida 33408

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.

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:
■Manager	Name: Ron Gutman	□Manager	Name:	
□Member	Address: 127+5 Pachwool Road	□Member	Address:	
□Authorized	No- 12 Pala Beach	□Authorized		
Person	FL 33408	Person		
□Other	Other	Other		□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
□Other	Other	Other		□Other,
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		-
□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.

Signature of an authorized person

Ron Gutman

Typed or printed name of signee



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT "GIVELOVEGETHELP, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR

REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY

AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE TWENTY-FIRST DAY OF MAY,
A.D. 2020, AT 5:51 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATE IS THE ONLY PAPER OF RECORD, THE LIMITED LIABILITY

COMPANY IN QUESTION NOT HAVING FILED AN AMENDMENT NOR HAVING

MADE ANY CHANGE WHATSOEVER IN THE ORIGINAL CERTIFICATE AS FILED.

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

Authentication: 202624393

Date: 03-01-21



February 13, 2021

RON GUTMAN 12775 PACHWOOD ROAD NORTH PALM BCH, FL 33408 US

SUBJECT: GIVELOVEGETHELP, LLC

Ref. Number: W21000019545

We have received your document for GIVELOVEGETHELP, 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):

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) 245-6051.

Sharon D Franklin Regulatory Specialist II

RECEIVED

Letter Number: 921A00003274

MAR 25 2021