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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_\_\_\_

## Foreign Limited Liability Company **GRNA Management LLC**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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

IN COMPLIANCE WITH SECTION 6/8/0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

I. GRNA Management L.	LC Limited Liability Company, must include "Limited	Liabihty Company	" " " [ [ C " or " [ [ C " ]	<del></del>
(.vane or roteign	examed Entonity Company, mass meader Entired	caoracy compan	y. E.E.C., OF EEC.	
f name unavailable, enter alterrate r	turne adopted for the purpose of transacting business in Flor	nda. The alternate na	me must include "Limited Liabili	ty Company," "L.L.C," or "LEC.")
Delaware		,		
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	3	(FEI number, il	applicable)
	(Date first transacted business in Florids, if prior to re (See sections 605,0904 & 605,0905, F.S. to determin	gistration.) e penalty liability)		
6191 N. State Hwy, 16	51, S. 400		. State Hwy. 161, S. 40	
Street Address of Principal Office)		6. (Mailing Address)		
Irving, TX 75038		Irving,	TX 75038	
				8+ 8+ 8+ 8+ 8+ 8+ 8+ 8+ 8+ 8+ 8+ 8+ 8+ 8
Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptab	de)	
	<u>~</u>	<u></u>	·	
Name:	Corporate Creations Network Inc.			1921 JUN -8 PH 4: 10
	801 US Highway I			
Office Address:		<del></del>		五百
	North Palm Beach		33408 Florida	th qu
	(City)	<u> </u>	(Zip code)	
lesignated in this applica	stance: gistered agent and to accept service of po tion, I hereby accept the appointment as ions of all statutes relative to the proper o	registered age	mt and agree to act in t	his capacity. I further agree
	s of my position as registered agent.	nal	2	
		Jacob Contract of the Contract	Joseph Par Special Se	
	(Registered agent's si	ignature)	Special Sc	www.

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: GRNA LLC	□Manager	Name: Norman Abdallah
■Member	Address: 6191 N. State Hwy. 161, S. 400	□Member	Address: 6191 N. State Hwy. 161, S. 400
□Authorized	Irving, TX 75038	□Authorized	Irving, TX 75038
Person		Person	
□Other	□Other	President	Other
□Manager	Name: William S. Martens III	□Manager	Name:
□Member	Address: 6191 N. State Hwy. 161, S. 400	□Member	Address: 6191 N. State Hwy. 161, S. 400
□Authorized	Irving, TX 75038	□Authorized	Irving, TX 75038
Person		Person	
<b>Secretary</b> Secretary	☐Other	Other	☐ Other
□Manager	Name:	□Manager	Name: 25
□Member	Address:	□Member	7 (8)
□Authorized		□Authorized	
Person		Person	
□Other	Other	Other	Other 3

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.

Cool	
	Signature of an authorized person
Corey Horsch, Treasurer	
	Typed or printed name of signee

## Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "GRNA MANAGEMENT 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 EIGHTH DAY OF JUNE, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GRNA MANAGEMENT LLC" WAS FORMED ON THE FOURTH DAY OF JUNE, A.D. 2021.

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





Authentication: 203396385

Date: 06-08-21