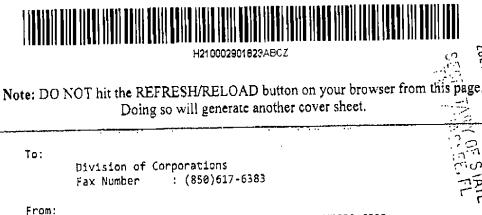
Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000290182 3)))



Account Name : ALLSTATE CORPORATE SERVICES CORP

Account Number : 120040000031 : (800)906-9220 Phone : (800)906-9880 Fax Number

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

Email	Address:	
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## Foreign Limited Liability Company GEORGE FUND DEVELOPMENT GROUP, LLC

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\$130.00

Electronic Filing Menu

Corporate Filing Menu

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### **COVER LETTER**

TO:		ation Section of Corporations					
avia Tr		GEORGE FUND DEVELOPMENT GROUP, LLC					
SUBJE	:Cr:	Name of Limited Liability Company					
The one Existen	closed "Ay acc, and ch	pplication by Foreign Limited Lia neck are submitted to register the a	bility Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florida.				
Please	return all	correspondence concerning this m	natter to the following:				
		STEVEN WEISS					
			Name of Person				
ALLSTATE CORPORATE SERVICES CORP.							
Firm/Company							
2215 Hendrickson Street, Suite !							
Address							
		Brooklyn, NY 11234					
			City/State and Zip Code				
		FILING@ACS123.COM	<i>/</i>				
		E-mail addres	s: (to be used for future annual report notification)				
For fi	irther info	rmation concerning this matter, pl	lease call:				
SAL ABECASIS		ABECASIS	at ()				
		Name of Contact Perso	The state of the s				
	Regis Divis P.O.	ng Address: stration Section sion of Corporations Box 6327 hassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Please	25 00 Filing Fee 💹 \$130.00 R	DA 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 GEORGE FUND DEVELOPMENT GROUP, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC.," or "LLC.") (If name unavailable, once alternate name adopted for the purpose of transacting business in Fiorida. The alternate name must include "Limited Liability Company," "L.L.C." or "LUC.") NEW YORK (Jurisdiction under the law of which foreign limited liantity company is organized) (Date first fromsacted business in Floods, if prior to registration.) (See sections 603.0904 & 603.0905, F.S. to determine possity liability). 480 Hibiscus Street, Unit 820, West Palm Beach, PL 33401 480 Hibisous Street, Unit 820, West Palm Beach, FL 33401 (Mulling Address) (Street Address of Principal Office) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Meghan George Name: 480 Hibiscus Street, Unit 820 Office Address: West Palm Beach 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. Meghan George

(Registered 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:  □Manager  ■Member  □Authorized  Person  □Other	Name and Address:  Meghan George  Address:  480 Hibiscus Street, Unit 820  West Palm Beach, FL 33401	Title or Capacity:  □ Manager  □ Member  □ Authorized  Person  □ Other	Address:	Name and Address:
☐Manager ☐Member ☐Authorized Person ☐Other	Name:Address;	☐Manager ☐Member ☐Authorized Person ☐Other	Address:	□ Other
☐Manager ☐Member ☐Authorized Person ☐Other	Name:	☐Manager ☐Member ☐Authorized Person ☐Other	Address:	□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.

Meghan Geo	rgc	
	Signature of an authorized person	
Meghan George		
	Typed or printed name of signee	

#### STATE OF NEW YORK

#### DEPARTMENT OF STATE

#### Certificate of Status

I, ROSSANA ROSADO, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name:

GEORGE FUND DEVELOPMENT GROUP, LLC

DOS ID Number:

4887181

Entity Type:

DOMESTIC LIMITED LIABILITY COMPANY

Entity Status:

**EXISTING** 

Date of Initial Filing with DOS:

01/28/2016

Statement Status:

CURRENT :

Statement Due Date:

01/31/2022

I certify that the following is a list of documents on file in the Department of State for said entity:

Document Type:

ARTICLES OF ORGANIZATION

Date of Filing:

01/28/2016

Entity Name:

GEORGE FUND DEVELOPMENT GROUP, LLC

Document Type:

CERTIFICATE OF PUBLICATION

Date of Filing:

05/31/2016

Document Type:

BIENNIAL STATEMENT

Date of Filing:

01/03/2020

Effective Date:

01/01/2020

Above space is left blank intentionally.

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on July 30, 2021 at 11:31 A.M.

ROSSANA ROSADO, Secretary of State

Brendon C Hugher

By Brendan C. Hughes
Executive Deputy Secretary of State

Authentication Number: 100000173026 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at http://ecorp.dos.ny.gov

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