

M21000016142

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

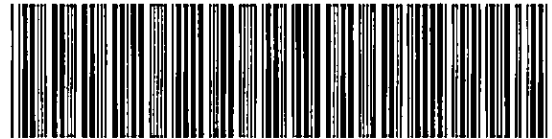
(Document Number)

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Special Instructions to Filing Officer:

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SECRETARY OF STATE
MAIL ASSISTANT (clerk)

2021 NOV 30 AM 9:40

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DEC 03 2021

M. SOLOMON

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: JULIAN K. GRANT INVESTMENT LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

JULIAN GRANT-JOHNSON

Name of Person

JULIAN K. GRANT INVESTMENT, LLC

Firm/Company

7706 NW GLADWELL LANE

Address

PORT ST. LUCIE, FL 34987

City/State and Zip Code

JULIANKGRANTINVESTMENTLLC@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JULIAN GRANT-JOHNSON

561

901-1603

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2021 NOV 30 AM 9:40

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**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:

1. JULIAN K. GRANT INVESTMENT, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

JULIAN GRANT INVESTMENT LLC

(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 "LLC.")

2. Nevada 3. 84-3821702
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. NO BUSINESS IN FLORIDA YET
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 7706 NW GLADWELL LANE 6. 7706 NW GLADWELL LANE
(Street Address of Principal Office) (Mailing Address)

PORT ST. LUCIE, FL 34987 PORT ST. LUCIE, FL 34987

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: JULIAN GRANT-JOHNSON
Office Address: 7706 NW GLADWELL LANE
PORT. ST. LUCIE, FL 34987
(City) Florida (Zip code)

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.


(Registered agent's signature)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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]:

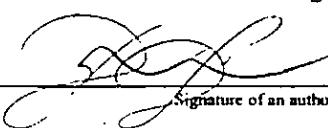
<u>Title or Capacity:</u>		<u>Name and Address:</u>		<u>Title or Capacity:</u>		<u>Name and Address:</u>	
<input checked="" type="checkbox"/> Manager	Name:	JULIAN GRANT-JOHNSON		<input type="checkbox"/> Manager	Name:		
<input type="checkbox"/> Member	Address:	7706 NW GLADWELL LANE		<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized		PORT ST. LUCIE, FL 34987		<input type="checkbox"/> Authorized			
Person				Person			
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input type="checkbox"/> Manager	Name:			<input type="checkbox"/> Manager	Name:		
<input type="checkbox"/> Member	Address:			<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized				<input type="checkbox"/> Authorized			
Person				Person			
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input type="checkbox"/> Manager	Name:			<input type="checkbox"/> Manager	Name:		
<input type="checkbox"/> Member	Address:			<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized				<input type="checkbox"/> Authorized			
Person				Person			
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	

FILED
2021 NOV 30 AM 9:40
SECRETARY OF STATE
ADMINISTRATIVE SERVICES

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)

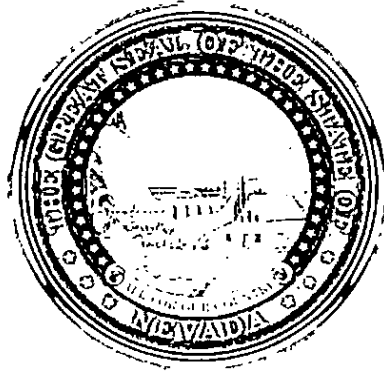
10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Signature of an authorized person

JULIAN GRANT-JOHNSON

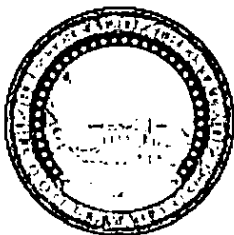
Typed or printed name of signer



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **JULIAN K. GRANT INVESTMENT, LLC**, as a FOREIGN LIMITED-LIABILITY COMPANY duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 10/24/2019, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 11/22/2021.

Barbara K. Cegavske

BARBARA K. CEGAVSKE
Secretary of State

Certificate Number: B202111222171993

You may verify this certificate
online at



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 4, 2021

JULIAN GRANT-JOHNSON
JULIAN K. GRANT INVESTMENT LLC
7706 NW GLADWELL LANE
PORT ST. LUCIE, FL 34987

SUBJECT: JULIAN K. GRANT INVESTMENT LLC
Ref. Number: W21000130119

We have received your document for JULIAN K. GRANT INVESTMENT LLC .
However, the enclosed document has not been filed and is being returned to you
for the following reason(s):

Attached to your resubmitted application is information regarding a Nevada
company. If your company is located in Nevada and you are transacting or want
to transact business in Florida, you will need to mail to our office to my attention
a Certificate of Good Standing from Nevada to be applied to your already
submitted Foreign application.

If you have any questions concerning the filing of your document, please call
(850) 245-6051.

Mel Solomon
Senior Section Administrator

Letter Number: 221A00026899

*Rec'd
11/30/21*



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 30, 2021

JULIAN GRANT-JOHNSON
JULIAN K. GRANT INVESTMENT LLC
7706 NW GLADWELL LANE
PORT ST. LUCIE, FL 34987

SUBJECT: JULIAN K. GRANT INVESTMENT LLC
Ref. Number: W21000130119

We have received your document for JULIAN K. GRANT INVESTMENT LLC and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(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.~~ →

Florida was listed on line item number 2. If you intended to file for a Florida LLC, then please complete the enclosed Florida LLC form and return to me. If you are trying to file a Foreign, then please list the State in which you are currently registered as on line 2.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon
Senior Section Administrator

Letter Number: 121A00023557