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## **COVER LETTER**

	Registration Section Division of Corporations					
UBJEC	GRAND BANKS YACHTS EMPLOYMENT:	NT SERVICE LLC				
ODOLC		of Limited Liability Company	<del></del>			
he enclo xistence	sed "Application by Foreign Limited Liability Co , and check are submitted to register the above re	ompany for Authorization to Transact Business in Florid ferenced foreign limited liability company to transact bu	la," Certifica Isiness in Fl			
ease ret	rum all correspondence concerning this matter to	the following:				
	SAMUEL H. COMPTON III					
		Name of Person	_			
	GRAND BANKS MARINE GROUP,	LTD				
	Firm/Company					
	450 SW SALERNO RD					
	Address					
	STUART, FL 34997		2622 : :			
	City/State and Zip Code					
	HANKC@GBMARINEGROUP.COM		-D			
	E-mail address: (to be	used for future annual report notification)	7: ?L			
or furth	er information concerning this matter, please call	:	24			
	SAMUEL H. COMPTON III	772 286-9800 at ( )				
	Name of Contact Person	Area Code Daytime Telephone Number				
	Mailing Address:	Street Address:				
	Registration Section	Registration Section				
	Division of Corporations	Division of Corporations				
	P.O. Box 6327	The Centre of Tallahassee				
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DEPA  \$125.00 Filing Fee \$130.00 Filing Fee  Certificate of	& 🗆 \$155.00 Filing Fee & 🗆 \$160.00 Filing Fe				

## 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:

(Name of Foreign	Limited Liability Company; must include "Limited	Lizbility	Company," "L.L.C.," or "LLC.")		
name unavailable, enter alternate n	same adopted for the purpose of transacting business in Flor	rida. The	ulternate name must include "Limited Liability	Company," "L.L.C," or "LLC."	
DELAWARE			86-3784851		
(Jurisdiction under the law of which foreign limited liability company is organized)		3.	(FEI number, if	(FEI number, if applicable)	
	(Date first transacted business in Florida, if prior to re (See sections 605.0904 & 605.0905, F.S. to determine	gistration e penalty	) liability)	_	
450 SW SALERNO I	RD	,	450 SW SALERNO RD		
et Address of Principal Office)	<del></del>	٥.	(Mailing Address)	<del></del>	
STUART, FL 34997			STUART, FL 34997		
				.022 J.	
	<u> </u>			<u> </u>	
Name and street addres	ss of Florida registered agent: (P.O. Box	NOT a	cceptable)	15	
				<del></del>	
Name:	Corporation Service Company			: 7:2	
Office Address:	1201 Hays Street			÷	
	Tallahassee		32301 , Florida		
			(7in enda)	_	
	(City)		(zip code)		
signated in this applica comply with the provisi	. ,	registe	for the above stated limited liab tred agent and agree to act in th	is canacity. I freshoe.	

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: Title or Capacity: Name and Address: Name and Address: Name: \_ GRAND BANKS MARINE GROUP, LTD ■ Manager Name: □Manager Address: \_\_ 450 SW SALERNO RD ■Member Address: \_ □Member STUART, FL 34997 **STUART, FL 34997** ☐ Authorized Authorized SAMUEL H. COMPTON III Person Person Other\_ Other Other\_\_\_\_ □Other ☐ Manager □Manager Name: ☐ Member Address: \_\_\_\_\_ Address: \_\_\_\_ □Member ☐ Authorized ☐ Authorized Person Person □Other\_\_ Other\_\_\_ □Other □Manager Name: \_\_\_\_\_ ☐Manager Name: \_\_\_\_ □Member Address: \_\_\_\_ Address: \_\_\_\_ □Member ☐ Authorized ☐ Authorized Person Person ☐Other\_\_\_\_\_ ☐Other\_\_\_\_ Other\_\_\_ □Other 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 shird degree felony as provided for in s.817.155, F.S. Signature of an authorized person SAMUEL H. COMPTON III

Typed or printed name of signee

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "GRAND BANKS YACHTS EMPLOYMENT SERVICE,

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 FIFTH DAY OF AUGUST, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GRAND BANKS

YACHTS EMPLOYMENT SERVICE, LLC" WAS FORMED ON THE FIFTEENTH DAY OF

APRIL, A.D. 2021.

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

2022 : 15 Pil 7:21

Authentication: 204095475

Date: 08-05-22

5843966 8300 SR# 20223187971