

1122000015752

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

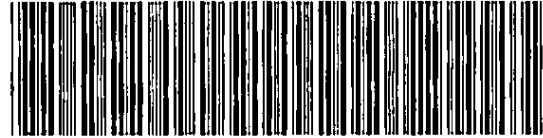
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



300394799093

09/26/22--01039--017 **130.00

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2022 OCT 13 AM 10:48

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T. LEMIEUX

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168521M
2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GAMETIME CONSTRUCTION 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:

MARCUS ROEBUCK
Name of Person

GAMETIME CONSTRUCTION LLC
Firm/Company

596 NW LAMBRUSCO DRIVE
Address

PORT ST. LUCIE, FL 34986
City/State and Zip Code

MROEBUCK@GAMETIMECONSTRUCTION.COM
E-mail address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

MARCUS ROEBUCK at 404, 804-6849
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 4, 2022

MARCUS ROEBUCK
596 NW LAMBRUSCO DR
PORT ST LUCIE, FL 34986

SUBJECT: GAMETIME CONSTRUCTION LLC
Ref. Number: W22000125897

We have received your document for GAMETIME CONSTRUCTION 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):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 922A00022145

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. GAMETIME CONSTRUCTION LLC.

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "L.L.C.")

2. GA
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "L.L.C."

3. 84-4849998

(FEI number, if applicable)

09/20/2022

(Date first transacted business in Florida, if prior to registration.
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability.)

5. 596 NW LABRUSCO DRIVE

(Street Address of Principal Office)

6. 596 NW LABRUSCO DRIVE

(Mailing Address)

PORT ST. LUCIE, FL 34986

PORT ST. LUCIE, FL 34986

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

Name:

MARCUS ROEBUCK

Office Address:

596 NW LABRUSCO DRIVE

PORT ST LUCIE

(City)

Florida

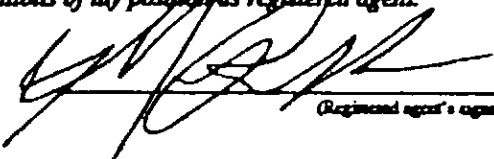
34986

(Zip Code)

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FILED
TALLAHASSEE, FLORIDA

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)

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:

☒ Manager Name: MARLUS ROEBUCK

☐ Member Address: 596 NW LAMBRUSCO DR

☐ Authorized PORT ST. LUCIE, FL 34986

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: Name and Address:

☒ Manager Name: QUENTIN LUSBY

☐ Member Address: 596 NW LAMBRUSCO DR

☐ Authorized PORT ST. LUCIE, FL 34986

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: ALFRED PURIFOY JR.

☐ Member Address: 596 NW LAMBRUSCO DR

☐ Authorized PORT ST. LUCIE, FL 34986

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

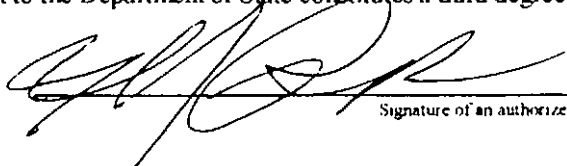
Person _____

☐ 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

STATE OF GEORGIA

Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

GAMETIME Construction LLC.

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 23283091
Date Inc/Auth/Filed: 01/29/2026
Jurisdiction : Georgia
Print Date : 07/05/2022
Form Number : 211



Brad Raffensperger

Brad Raffensperger
Secretary of State