

M220000018929

(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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2022 DEC 19 AM 9:59

11:50

DEC 21 2022

M. SOLOMON

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: GBN PROPERTIES, 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:

MARC D. FINE

\_\_\_\_\_  
Name of Person

JACKSON KELLY PLLC

\_\_\_\_\_  
Firm/Company

PO BOX 1507

\_\_\_\_\_  
Address

EVANSVILLE, IN 47706

\_\_\_\_\_  
City/State and Zip Code

mdfine@jacksonkelly.com

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

2022 DEC 19 AM 9:59

FILED

For further information concerning this matter, please call:

Marc D. Fine

812

422-9444

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

**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. GBN PROPERTIES, LLC

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

(Jurisdiction under the law of which foreign limited liability company is organized)

3. \_\_\_\_\_

(FEI number, if applicable)

4. \_\_\_\_\_

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

5. Jeff P. McGowan

(Street Address of Principal Office)

415 Crosslake Drive, Suite C

Evansville, IN 47715

6. Jeff P. McGowan

(Mailing Address)

415 Crosslake Drive

Evansville, IN 47715

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

Name: Paul McGowan

Office Address: 28614 Lisburn Court

Bonita Springs,

(City)

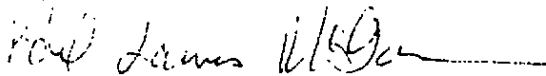
, Florida

34135

(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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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: Jeffrey P. McGowan

☐ Member

Address: 415 Crosslake Dr

☐ Authorized

Evansville, IN 47715

Person

☐ Other

☐ Other

☐ Manager

Name: \_\_\_\_\_

☐ Member

Address: \_\_\_\_\_

☐ Authorized

Person

☐ Other

☐ Other

☐ Manager

Name: \_\_\_\_\_

☐ Member

Address: \_\_\_\_\_

☐ Authorized

Person

☐ Other

☐ Other

Title or Capacity:

Name and Address:

☐ Manager

Name: Paul McGowan

☒ Member

Address: 28614 Lisburn Court

☐ Authorized

Bonita Springs, FL 34135

Person

☐ Other

☐ Other

☐ Manager

Name: \_\_\_\_\_

☐ Member

Address: \_\_\_\_\_

☐ Authorized

Person

☐ Other

☐ Other

☐ Manager

Name: \_\_\_\_\_

☐ Member

Address: \_\_\_\_\_

☐ Authorized

Person

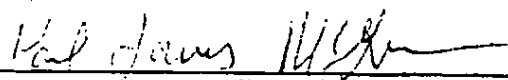
☐ Other

☐ 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

Jeffrey P. McGowan

**State of Indiana**  
**Office of the Secretary of State**

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, HOLLI SULLIVAN, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

**GBN PROPERTIES, LLC**

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on October 17, 2022, and was in existence or authorized to transact business in the State of Indiana on December 19, 2022.

I further certify this Domestic Limited Liability Company has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, December 19, 2022

*Holli Sullivan*

HOLLI SULLIVAN  
SECRETARY OF STATE

202210171631811 / 20222921450

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on January 18, 2023.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 9, 2022

JACKSON KELLY PLLC  
ATTN: ASHLEY  
PO BOX 1507  
EVANSVILLE, IN 47706-1507

SUBJECT: GBN PROPERTIES, LLC  
Ref. Number: W22000151939

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

We are returning the check in the amount of \$160.00 and the Certificate of Existence as no Foreign application was included. An application is enclosed for your convenience.

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

Mel Solomon  
Senior Section Administrator

Letter Number: 722A00027431

RECEIVED

DEC 19 2022