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(Req	uestor's Name)
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COVER LETTER

ECT:	GreyHaven Condos LLC				
Ler.	Namo	e of Limited Liability C	Company		
			ation to Transact Business in Florida," Certificated liability company to transact business in Florida		
return	all correspondence concerning this matter to	o the following:			
	Christopher Beagle				
		Name of Person			
	GreyHaven Condos LLC				
Firm/Company					
	1100 Azie Morton R	Rd, #1105			
		Address	 		
	Austin, TX 78704				
	C	ity/State and Zip Code			
	greyhavencondos@g	gmail.com			
	E-mail address: (to be	used for future annual	report notification)		
rther int	formation concerning this matter, please cal	i:			
Cł	nristopher Beagle	_{at} 423	6537877		
-	Name of Contact Person	Area Code	Daytime Telephone Number		
	ing Address:	Street Address:			
Registration Section		Registration Section			
	ision of Corporations . Box 6327	porations Division of Corporations The Centre of Tallahassee			
	ahassee, FL 32314		2415 N. Monroe Street, Suite 810		
		Tallahassee, F	L 32303		
Pleas	osed is a check for the following amount: se make check payable to: FLORIDA DEP 125.00 Filing Fee S130.00 Filing Fee				

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: L GreyHaven Condos LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") Coastline Condos 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.") 3 92-1322626 Texas Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) 01/01/2023 (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 1100 Azie Morton Rd (Street Address of Principal Office) #1105 Ooltewah, TN 37363 Austin, TX 78704 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agents Inc Name: 7901 4th St N STE 300 Office Address: St. Petersburg 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

(Registered agent's signature)

and accept the obligations of my position as registered agent.

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:	Title or Capacity:	Name and Address:
□Manager	Name:		Manager	Name: Christopher Beagle
□Member	Address:		□Member	Address:
□Authorized			□Authorized	9537 Owl Gap Lane
Person			Person	Ooltewah TN 37363
□Other		Other	Other	□Other
□Manager	Name:		∐Manager	Name:
□Member	Address:		□Member	Address:
□Authorized			□Authorized	
Person			Person	
∐Other		∐Other	□Other	Other
□Manager	Name:		ШManageт	Name:
□Member	Address:		□Member	Address:
□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 third degree felony as provided for in s.817.155, F.S.

Signature of an authorized person

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Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jane Nelson Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for GreyHaven Condos LLC (file number 804812643), a Domestic Limited Liability Company (LLC), was filed in this office on November 17, 2022.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 27, 2023.



Jane Melson

Jane Nelson Secretary of State