Mazmon 53

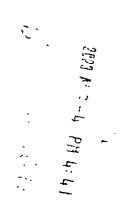
(Requestor's Name)					
(Address)					
(Address)					
	City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL			
	(Business Entity Name)				
(Document Number)					
Certified Copies	Certificates of \$	Status			
Special Instructions to Filing Officer:					





400408680654

05/22/23--01027--027 **130.00



T. LEMIEUX **AUG - 7** 2023

COVER LETTER

TO:

ГО:	Registration Section Division of Corporations					
UBJE	Gaslight Getaways, LLC					
Name of Limited Liability Company						
		Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida				
lease	return all correspondence concerning this matter	to the following:				
	Erin Glynn					
	-	Name of Person				
	Gaslight Getaways, LLC					
	Firm/Company					
	266 Lakeshore Dr					
Address						
	Berkeley Lake, GA 30096					
		City/State and Zip Code				
	gaslight.gctaways@gmail.com					
	E-mail address: (to b	pe used for future annual report notification)				
or fur	ther information concerning this matter, please ca	all:				
	Erin Glynn	404 226-3007 at ()				
	Name of Contact Person	Area Code Daytime Telephone Number				
	Mailing Address: Registration Section	Street Address: 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 DE \$\Boxed{\text{S125.00 Filing Fee}} \Boxed{\text{S130.00 Filing Fe}} \text{Certificate}	ce & \$\Bigsim\$ \$155.00 Filing Fee & \$\Bigsim\$ \$160.00 Filing Fee, Certificate				



June 3, 2023

ERIN GLYNN 266 LAKESHORE DR BERKELEY LAKE, GA 30096

SUBJECT: GASLIGHT GETAWAYS, LLC

Ref. Number: W23000077836

We have received your document for GASLIGHT GETAWAYS, 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.

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.

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: 723A00012641

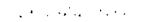
RECEIVED

AUG 0 4 2023

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 unavailable, enter alternate name adopted for the purpose of transacting business in Flo	orida. The alterrate name must include "Limited Linkilla, Commun. Unit L. C.)
Georgia	92-3732068
(Jurisdiction under the law of which foreign limited liability company is organized)	3. (FEI number, if applicable)
No transactions yet	
(Date first transacted business in Florida, if prior to r (See sections 605,0904 & 605,0905, F.S. to determine	egistration.)
Jeffrey and Erin Glynn	Erin Glynn 6.
cet Address of Principal Office)	(Mailing Address)
137 Sapodilla Drive	266 Lakeshore Drive
Port St. Joe, FL 32456	Berkeley Lake, GA 30096
Name and street address of Florida registered agent: (P.O. Box	NOT acceptable)
Name: Northwest Regist	ertd Agent LLC
Office Address: 7901 4th Street	; Ste 300
St Petr, shura	Florida 33702.
gistered agent's acceptance:	



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: Jeffrey Glynn	□Manager	Name:	
□Member	Address: 266 Lakeshore Drive	□Member	Address:	
□Authorized	Berkeley Lake, GA 30096	□Authorized		
Person		Person		
□Other	Other	□Other		[]Other
□Manager	Name:	∐Manager	Name:	
□Member	Address:	□Member		
□Authorized		□Authorized		
Person		Person		
∐Other	Other	□Other		□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person	<u></u>	
□Other	□Other	□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

Erin Glynn

Typed or printed name of signee



Control Number: 20247836

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

Gaslight Getaways, 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 : 25652286 Date Inc/Auth/Filed: 12/16/2020 Jurisdiction : Georgia Print Date : 07/18/2023

Form Number : 211



Brad Rafforages ger

Brad Raffensperger Secretary of State