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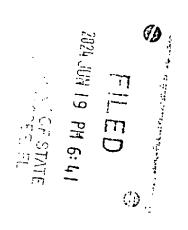
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						





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96/97/24--01996--008 **₩**130.00



T. LEMIEUX

JUN 1 9 2024

COVER LETTER

e enclosed "Application by Foreign Limited Liability Co stence, and check are submitted to register the above re			
istence, and check are submitted to register the above re case return all correspondence concerning this matter to	eferenced foreign limited liability company to transact business in F		
istence, and check are submitted to register the above re ease return all correspondence concerning this matter to	eferenced foreign limited liability company to transact business in F		
Matthew A. BArtlett	the following:		
Matthew A. BArtlett			
	Name of Person		
Gulf Shores Getaways, LLC			
	Firm/Company		
5093 South 1500 West			
	Address		
Riverdale, Utah 84405			
City	ly/State and Zip Code		
bartlett_law@hotmail.com			
E-mail address: (to be u	used for future annual report notification)		
r further information concerning this matter, please call:	:		
Matthew Bartlett	80) 643-7090 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:			



June 17, 2024

MATTHEW A BARTLETT 5093 S 1500 WEST RIVERDALE, UT 84405

SUBJECT: GULF SHORES GETAWAYS, LLC

Ref. Number: W24000091523

We have received your document for GULF SHORES 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):

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.

Letter Number: 924A00013113

Tracy L Lemieux Regulatory Specialist II

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	TION 605.0902, FLORIDA STATUTES, THE FO SINESS INTHE STATE OF FLORIDA:	ILOWING IS SUBMITTI	D TO REGISTE	R A FORFIGN	LIMITI:	I) HABIHIY
1. Name of Foreign	Limited Dability Company; must include "Limited	Liability Company," "L.L.	.C.," or "LLC.")	·		
	,	<i>, , ,</i>				
	name adopted for the purpose of transacting business in Flo	rida. The alternate name must	include "Limited Lia	hility Company,"	"lalaC," e.	t"I,LC.")
Utah		1				
(Imisdiction under the law of v	high foreign limited liability company is organized)	J	(FEI numbe	r, il'applicable)		_
1 1						
4. 06/01/20	24					
, ,	(Date first transacted business in Florida, if prior to r (See sections 605 0904 & 605 0905, F.S. to determine	ogistration.) ne penalty liability)				
1.12 5	Less Decom	F ~C-7	S	1500	\=	es C
5. 2015 Soc. (Street Address of Principal Office)	in 1500 WEST	6. OMS	Iress)	1500	· We	
_		_				
Piveenaie	UT 84405	RIVER	sale . c	7744	84	405
	/					_
					-	
7. Name and street addre	ss of Florida registered agent: (P.O. Box	NOT acceptable)				
						GĐ.
	Registered Agents Inc				202	
Name:	registered Agents IIIC			i	124 JUN 19	
	TOOK ALL OLD OTE 200			<u> </u>	<u> </u>	
Office Address:	7901 4th St N STE 300			3	9	
	CA D-Aburg			20		ED
	St. Petersburg	Floric	la (Zip code)	OF STAT	h :9 ⊭J	U
	(Cit ²)		(Zip code)	:TA	<u>ب</u>	Ī
Registered agent's accep	otance:			-	_	40
Having been named as re designated in this applica	gistered agent and to accept service of pation, I hereby accept the appointment as	rocess for the above :	stated limited li Laurea to act is	iability comp Athic canaci	any at . I Co.	the plageV 👌
	ions of all statutes relative to the proper					
and accept the obligation	s of my position as registered agent.					
	The Ades					
	Dold Kenstern Larent's	ignature)				

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	Matthew A. Bartlett Name:	□Manager	John M. Webster Name:
■Member	Address: 5093 South 1500 West	■Member	Address: 5093 South 1500 West
□Authorized	Riverdale, Utah 84405	□Authorized	Riverdale, Utah 84405
Person		Person	
Other	Other	□Other	□Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
☐Authorized		□Authorized	
Person		Person	
□Other	∐Other	□Other	Other
□Manager	Name:	∐Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	∐Other	□Other	□Other

<u>Important Notice</u>: 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.

(Fignature of an authorized person



Utah Department of Commerce

Division of Corporations & Commercial Code 160 East 300 South, 2nd Floor, PO Boy 146705

Salt Lake City, UT 84114-6705 Service Center: (801) 530-4849 Toll Free: (877) 526-3994 Utah Residents Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov

06/17/2024 12292489-016006172024-1494155

CERTIFICATE OF EXISTENCE

Registration Number: 12292489-0160

Business Name: GULF SHORES GETAWAYS, LLC

Registered Date: May 05, 2021 **Entity Type:** LLC - Domestic

Status: Current

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



Leigh Veillette

Director

Division of Corporations and Commercial Code

& Veillette