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SECRETARY OF STATE

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: GGLLC Nam	ne of Limited Liability Company				
The enclosed "Application by Foreign Limited Liability Existence, and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida.				
Please return all correspondence concerning this matter	to the following:				
Gisselle Jomeque	-				
	Name of Person				
GGLLC					
	Firm/Company				
6820 NW Cross Rd					
0020 1141 01033 114	Address				
Parkville, Missouri, 64152					
	City/State and Zip Code				
ggllcjomeque@yahoo.com E-mail address: (to b	ie used for future annual report notification)				
For further information concerning this matter, please ea	all:				
Guillermo Mayuri	at (816) 808-9863				
Name of Contact Person	Area Code Daytime Telephone Number				
Mailing Address: Registration Section	Street Address: Registration Section				
Division of Corporations P.O. Box 6327	Division of Corporations 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 ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee Certificate	ee & \$\Boxed{\Boxes}\$ \$155.00 Filing Fee & \$\Boxed{\Boxes}\$ \$				

STATE OF MISSOURI



John R. Ashcroft Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, JOHN R. ASHCROFT, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

GGLLC LC1050585

was created under the laws of this State on the 13th day of April, 2010, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 6th day of August, 2024.

Secretary of State

THE SOLUTION OF MILES SECTION OF MILES S

Certification Number: CERT-08062024-0039

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 GGLLC							
(Name of Foreign	Limited Liability Company; must include "Limited	Liability C	Company," "L.L.C	.," or "LLC.")			
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in Flo	orida. The alt	ernate name must in	clude "Limited Liability	· Company," "L.	اًC."،	or "L.L.C."}
2 Missouri			3. VNXVCWWUJ681				
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	_		(Ff:I number, if a	applicable)		
4	(Date first transacted business in Elwida (Engler to a	cuictration)			_		
	(Date first transacted business in Florida, if prior to r (See sections 605,0904 & 605,0905, F.S. to determin	e penalty lia	ıbilityı				
5. 6820 NW Cross Rd Pa (Street Address of Principal Office)	irkville, MO 64152	6. <u>6</u>	820 NW Cros: (Mailing Addre	s Rd Parkville, N	10 64152		_
					f	24	SEV Jas
					•	등 -	
	1001	_				<u></u>	
7. Name and street address	s of Florida registered agent: (P.O. Box	NOT acc	ceptable)			PH 12: 06	SIATE
	Pablo Dominguez					ை	SNO
Name:							
Office Address:	401 NW North River Dr APT 1113						
	Miami		, Florida		_		
	(City)			(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)