

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

M7500006418

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H25000161749 3)))



H250001617493ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
 Fax Number : (850)617-6383

Account Name : BERGER-SINGERMAN-LLP-MIAMI
 Account Number : I20090000006
 Phone : (305)755-9500
 Fax Number : (305)714-4340

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: agrover@provercorlew.com

Foreign Limited Liability Company
G&C 150 Palmetto Management, LLC

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 03 |
| Estimated Charge | \$155.00 |

FRI 02 2025 FRI 02 01 111

FRI 02 01 111

FRI 02 01 111

ocusign Envelope ID: B337C4EA-96CB-42BA-85A8-E73313A77DA4

H25000161749 3

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. G&C 150 Palmetto Management, 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. Delaware

(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. 150 E. Palmetto Park Rd.

(Street Address of Principal Office)

Boca Raton, FL 33432

6.

1499 W Palmetto Park Rd.,

(Mailing Address)

Suite 415

Boca Raton, FL 33486

FILED
STATE
25 MAY -21 PM 5:49
BOCA RATON, FL

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

Name:

Anuj Grover

Office Address:

1499 W Palmetto Park Rd., Suite 415

Boca Raton

(City)

, Florida

33486

(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.

Anuj Grover

1A02MC28AFD48D

(Registered agent's signature)

H25000161749 3

ocusign Envelope ID: B337C4EA-96CB-42BA-B5A6-E73313A77DA4

H25000161749 3

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: Anuj Grover
 Address: 1499 W Palmetto Park Rd.
 Suite 415
 Boca Raton, FL 33486
 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: Mark Corlew
 Address: 1499 W Palmetto Park Rd.
 Suite 415
 Boca Raton, FL 33486
 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 submitted in a document to the Department of State constitutes a third degree felony as provided for in s.

Anuj Grover
 1A0E4C2B4FD45D...

Signature of an authorized person

Anuj Grover

Typed or printed name of signer

H25000161749 3

H25000161749 3

Delaware

The First State

Page 1

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "G&C 150 PALMETTO MANAGEMENT, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTIETH DAY OF APRIL, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



10178831 8300

SR# 20251909127

You may verify this certificate online at corp.delaware.gov/authver.shtml

C. B. Sanchez

Charuni Patibanda-Sanchez, Secretary of State

Authentication: 203575842

Date: 04-30-25

H25000161749 3