Electronically Filed
Docket: 24-CCB-0065
Filing Date: 01/04/2025 05:28:14 PM EST

Department of State: Division of Corporations

Allowable Characters

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Entity Details

THIS IS NOT A STATEMENT OF GOOD STANDING

File Number:	**3614641**	Incorporation Date / Formation Date:	**5/7/2024** (mm/dd/yyyy)
Entity Name:	**365 GAT LLC**		
Entity Kind:	**Limited Liability Company**	Entity Type:	**General**
Residency:	**Domestic**	State:	**DELAWARE**

REGISTERED AGENT INFORMATION

Name:	**HARVARD BUSINESS SERVICES, INC.**		
Address:	**16192 COASTAL HWY**		
City:	**LEWES**	County:	**Sussex**
State:	**DE**	Postal Code:	**19958**
Phone:	**302-645-7400**		

Additional Information is available for a fee. You can retrieve Status for a fee of $10.00 or more detailed information including current franchise tax assessment, current filing history and more for a fee of $20.00.

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