MIMMOSIS

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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Special Instructions to Filing Officer:					
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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 17, 2016

HUMBERTO L RODRIGUEZ GONZALEZ & RODRIGUEZ PL 999 PONCE DE LEON BLVD STE 1135 CORAL GABLES, FL 33134

SUBJECT: 536 EUCLID CONDO LLC

Ref. Number: W16000020112

We have received your document for 536 EUCLID CONDO LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

An individual must sign on behalf of the business entity you have designated as the registered agent.

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young Regulatory Specialist II

Letter Number: 116A00005533

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	536 Euclid Condo LLC				
Name of Limited Liability Company					
	sed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate o and check are submitted to register the above referenced foreign limited liability company to transact business in Florida				
Please	arn all correspondence concerning this matter to the following:				
	Humberto L. Rodriguez				
Name of Person					
	Gonzalez & Rodriguez PL				
Firm/Company					
999 Ponce de Leon Blvd. Ste. 1135					
Address					
	Coral Gables FL 33134				
City/State and Zip Code					
	E-mail address: (to be used for future annual report notification) The state of th				
	E-mail address: (to be used for future annual report notification)				
For furt					
	100 Houriguez				
	Name of Contact Person Area Code Daytime Telephone Number				
	AILING ADDRESS: ivision of Corporations egistration Section O. Box 6327 allahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				
Enclose	s a check for the following amount: 1 \$125.00 Filing Fee				

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. 536 Euclid Condo LLC	SUVESS IN THE STATE OF TECHNOAL		
(Name of Fore	ign Limited Liability Company; must include "Limite	d Liability Company," "L.L.C.,"	or "LLC.")
(If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for the purpose of transacting by	usiness in Florida. The alternate n	ame must include "Limited
2. Delaware	3.		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicab	le)
4. 3-2-16			,
*** <u>-</u>	(Date first transacted business in Florida, if p (See sections 605.0904 & 605.0905, F.S. to dete	rior to registration.)	
5. 999 Ponce de Leon Biv	•	innie penaty naomej	
Coral Gables, FL 3313-			
000 B 1. I	(Street Address of Principal Office)		
6. 999 Ponce de Leon Blv	d. PH 1135		<u>_</u>
Coral Gables, FL 3313	4		Ďu: 🎽
	(Mailing Address)		
7. Name and street addres	s of Florida registered agent: (P.O. Box NOT a	cceptable)	E E
Name:	Gonzalez & Rodriguez PL	11184111111111-1-1-1-1-1-1-1-1-1-1-1-1-1	5
Office Address:	999 Ponce de Leon Blvd. PH 1135		
	Coral Gables	, Florida 33134	
Registered agent's accept	(City)	(Zip code)	
Having been named as red designated in this applicate to complywith the provision	gistered agent and to accept service of process y tion, I hereby accept the appointment as registe ons of all statutes relative to the proper and con my position as registered agent (Registated agent's sign	red agent and agree to act in aglete performance of my dut	this capacity. I further agree
8. The name, title or capa	acity and address of the porson(s) who has/bave a	authority to manage is/are:	
Horacio P. Rodriguez	Franager		
999 0	and de lour	Burd Ph	1135
Coral C	Japan, FL 33,		
9. Attached is a certificate	of existence, no more than 90 days old, duly aut of which it is organized. (If the certificate is in a	forkign language, a translation	ng custody of records in the of the certificate under oath
	I in accordance with section 605.0203 (1) (b) Floothe Department of State constitutes a third degree		
	Humberto L. Rodriguez		

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "536 EUCLID CONDO 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 TWENTY-SECOND DAY OF FEBRUARY, A.D. 2016.

Authentication: 201865104

Date: 02-22-16

5432134 8300 SR# 20160956453