

M17000007408

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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17 AUG 28 AM 8:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*JZ*  
*8/29/17*



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 4, 2017

FERNANDO M. SOCOL, ESQ  
201 S. BISCAYNE BLVD., SUITE 905  
MIAMI, FL 33131 US

SUBJECT: AMBATU GROUP LIMITED LIABILITY COMPANY  
Ref. Number: W17000064078

We have received your document for AMBATU GROUP LIMITED LIABILITY COMPANY and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.," also are no longer acceptable.

Please return the corrected original and one copy of 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) 254-6051.

Judy A Leggett  
Regulatory Specialist II  
Registration Section

Letter Number: 217A00015878

2017 AUG 28 PM 2:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**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. AMBATU GROUP, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

AMBATU GROUP OF SOUTH FLORIDA 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. NEW JERSEY (Jurisdiction under the law of which foreign limited liability company is organized)      3. 90-1012615 (FEI number, if applicable)

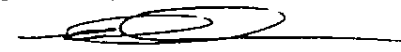
4. \_\_\_\_\_ (Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1491 Zenith Way (Street Address of Principal Office)      6. SAME (Mailing Address)  
Weston, FL 33327

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  
Name: Fernando M. Socol, Esq  
Office Address: 201 S. Biscayne Blvd., Ste 905  
Miami, Florida 33131  
(City) (Zip code)

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TALLAHASSEE, FLORIDA

**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)


8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Manager</u>	<u>Urdaneta Buitrago, Maide Y.</u> <u>1491 Zenith Way</u> <u>Weston, FL 33327</u>	<u>Manager</u>	<u>Tapia Tolentino, ALFIERI</u> <u>1491 Zenith Way</u> <u>Weston, FL 33327</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Use attachments if necessary)

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.

  
\_\_\_\_\_  
Signature of an authorized person

Maide Urdaneta Buitrago      MAIDE URDANETA

**STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY  
DIVISION OF REVENUE AND ENTERPRISE SERVICES  
SHORT FORM STANDING**

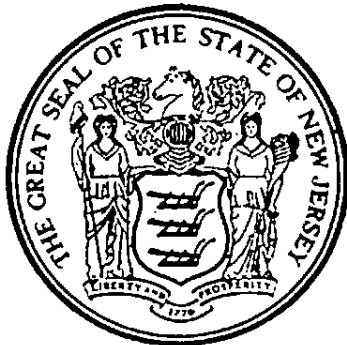
**AMBATU GROUP LIMITED LIABILITY COMPANY  
0400595318**

*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on August 19, 2013.*

*As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey. Annual Reports are outstanding for the following year(s): 2016*

*I further certify that the registered agent and office are:*

*MAIDE YOLIMAR URDANETA BUITRAGO  
7-05 SADDLE RIVER RD  
FAIR LAWN, NJ 07410*



*IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 27th day of July, 2017*

*Ford M. Scudder  
Acting State Treasurer*

*Certificate Number : 60S1467722*

*Verify this certificate online at*

*[https://www1.state.nj.us/TYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp)*