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<u></u>

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone

: (307)200-2803

Fax Number

: (855)330-1010

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

Email	Address:				

Foreign Limited Liability Company OAKLAND PARK STORAGE BUILDERS LLC

Certificate of Status	0
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Electronic Filing Menu Corporate Filing Menu

Help

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TAMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

If name unavailable, enter alter Liability Company," "L.L.C," of DELAWARE (Jurisdiction under the law of company is organized)	or "LLC.")	the purpose of trans	sacting busines	s in Clorida. The alternate ma	ma must include "Limitad
(Jurisdiction under the law of company is organized)				VIII I TOTAL. THE allemane ha	me mast memate Banaca
company is organized)		3.	N/A		
	f which foreign limited l	iability		(FEI number, it applicable	:)
. <u>N/A</u>	(Date first transac (See sections 605.09	cted business in Flo 904 & 605.0905, F.	orida, if prior to S. to determine	registration.)	_
1031 CROWN PARK					_
				·	201
		address of Principal			
. 1031 CROWN PARK C	CIRCLE, WINTER C	SARDEN, FL 34	1787	•	2017 AUG 30 A
		(Mailing Address))		
7. Name and street address	of Florida registered	agent: (P.O. Box	NOT accept	able)	3 0 10
Name:	REGISTERED AGE	ENTS INC.		_	5
Office Address:	3030 N. ROCKY	POINT DR.	STE 150A	-	- .
	TAMPA	(City)		Florida 33607 (Zip code)	_
Registered agent's accepta Having been named as regi- lesignated in this application to complywith the provision accept the obligations of my	istered agent and to a on, I hereby accept th us of all statutes relat	ic appointment a ive to the proper	s registered a	gent and agree to act in t	his capacity. I further ag
		(Registered age	nt's signature)		
8. The name, title or capac	rity and address of the	person(s) who ha	is/have author	ity to manage is/are:	
RICHARD BEAVERS, M	ANAGER, 1031 CR	OWN PARK CI	RCLE, WINT	TER GARDEN, FL. 3478	37
D. Attached is a certificate of urisdiction under the law of of the translator must be sub-	f which it is organized omitted)	L (If the certificat	e is in a forcig	gn language, a translation	of the certificate under out
	•	-t-	-	B	
_		Signature of an au	thorized person	В	

Typed or printed name of signee

RILEY PARK

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "OAKLAND PARK STORAGE BUILDERS LLC" IS

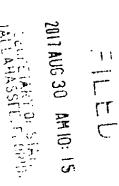
DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF AUGUST, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OAKLAND PARK STORAGE BUILDERS LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF AUGUST, A.D. 2017.

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





Authentication: 203135053

Date: 08-29-17

6526128 8300

SR# 20175927497