

M19000010739

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

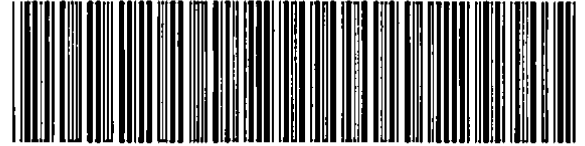
(Business Entity Name)

(Document Number)

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2019 NOV - 5 PM 2:55

NOV - 6 2019
M. SOLOMON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 21, 2019

TOLGA YALCINKAYA
5869 S KYRENE RD, STE 5
TEMPE, AZ 85283

SUBJECT: ALL ON TARGET LLC
Ref. Number: W19000087503

We have received your document for ALL ON TARGET LLC . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Mel Solomon
Regulatory Specialist II Supervisor

Letter Number: 619A00021691

2019 OCT 21 10:07



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 27, 2019

TOLGA YALCINKAYA
5869 S KYRENE RD, STE 5
TEMPE, AZ 85283

SUBJECT: ALL ON TARGET LLC
Ref. Number: W19000087503

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

THERE IS A FEE DUE OF \$155.00,

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6051.

Brooke N Kinsey
Regulatory Specialist II

Letter Number: 919A00020049

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. ALL ON TARGET 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. ARIZONA
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 83-3242351
(FEI number, if applicable)

4. 10/15/2019
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 5869 S. Kyrene rd #5
(Street Address of Principal Office)

6. 5869 S. Kyrene rd #5
(Mailing Address)

Tempe, AZ, 85283

Tempe, AZ 85283

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

Name: Tolga Yalankaya

Office Address: 1900 Tamiami Trail N #E0003
Naples, Florida 34102
(City) (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.

Tolga
(Registered agent's signature)

2019 NOV -6 PM 2:35

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: Tolga Yalcinkaya

Member Address: 620 W. Monte ave

Authorized Mesa, AZ 8520

Person _____

Other _____ Other _____

Title or Capacity: **Name and Address:**

Manager Name: Osman Dorman

Member Address: 1661 E. Linda

Authorized Chandler, AZ 8522

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

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 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.

Tolga
Signature of an authorized person

Tolga Yalcinkaya
Typed or printed name of signer

STATE OF ARIZONA



Office of the
CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

All On Target LLC

ACC file number: 1934253

was incorporated under the laws of the State of Arizona on 12/27/2018, and that, according to the records of the Arizona Corporation Commission, said limited liability company is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.

IN WITNESS WHEREOF, I have hereunto set my hand, affixed the official seal of the Arizona Corporation Commission, and issued this Certificate on this date: 11/01/2019



Matthew Neubert

Matthew Neubert, Executive Director