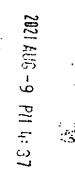
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(Requestor's Name)
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(,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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N.540
W21000104708
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Office Use Only



07/16/21--01017--017 **125.00





COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Bolis Properties LLC		
Name of Limited Liability Company		
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Existence, and check are submitted to register the above referenced foreign limited liability company to transact business.	Certifica	te of orida.
Please return all correspondence concerning this matter to the following:		
Gary Parilis		
Name of Person		
Bolis Properties LLC		
Firm/Company		
554 Flock Rd		
Address	292	
Hamilton Square, NJ 08690	2921 AUG -9	
City/State and Zip Code	-9	en e de
sparilis@mac.com	PH	7. mm)
E-mail address: (to be used for future annual report notification)	<u>.</u>	E 11
For further information concerning this matter, please call:	3	
Susan Parilis 908 285-0754		
Name of Contact Person Area Code Daytime Telephone Number		
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		
Enclosed is a check for the following amount:		
Please make check payable to: FLORIDA DEPARTMENT OF STATE \$\overline{\mathbb{Z}}\$\$ \$125.00 Filing Fee \$\overline{\mathbb{L}}\$\$ \$130.00 Filing Fee \$\overline{\mathbb{L}}\$\$ \$155.00 Filing Fee \$\overline{\mathbb{L}}\$\$ \$\$160.00 Filing I of Status & Certified Copy of Status & Certified Copy		

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: , Bolis Properties 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.") New Jersey

(Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5. 554 Flock Rd
(Street Address of Principal Office) Hamilton Square 08690 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agents Inc. Name: 7901 4th St N STE 300 Office Address: St. Petersburg 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.

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: Title or Capacity: Name and Address: Name: Gary Parilis Name: Susan Parilis Manager ✓ Manager Address: 554 Flock Rd Address: 554 Flock Rd Member Member Hamilton Square, NJ 08690 Hamilton Square, NJ 08690 Authorized Authorized Ретѕоп Person Other Other Other_ __Other_____ Manager ■ Manager Member Address: Member | Address: Authorized ☐ Authorized Person Person Other Other Other__ Manager Name: _____ Manager Member Address: ____ Member Address: Authorized Authorized Person Person Other Other Other Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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.

Typed or printed name of signee

Gary Parilis

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

BOLIS PROPERTIES LLC

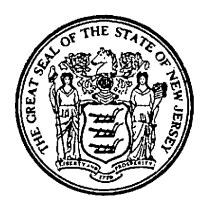
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I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on June 08, 2012.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

GARY PARILIS 554 FLOCK RD HAMILTON SQUARE, NJ 08690-1313



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 7th day of July, 2021

Elizabeth Maher Muoio State Treasurer

Certificate Number: 6120819525

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp



July 24, 2021

GAR PARILIS 554 FLOCK RD HAMILTON SQUARE, NJ 08690 US

SUBJECT: BOLIS PROPERTIES, LLC

Ref. Number: W21000104708

We have received your document for BOLIS PROPERTIES, 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):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$1,748.75.

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.

Sharon D Franklin Regulatory Specialist II

Letter Number: 921A00017293

Please see corrections

RECEIVED
AUG 0.9 2021