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S. ROBERTS
JUN 1 3 2022

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Camut Brother Name of	rs Rentals LLC Limited Liability Company
	npany for Authorization to Transact Business in Florida," Certificate of erenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the	e following:
Melody C	Amut Name of Person
Camuti Brothe	
	Beach Blvd Address
Venice, Fl	34285 State and Zip Code Mut. Lom ed for future annual report notification)
melodye Ca E-mail address: (to be us	mut. Lom ed for future annual report notification)
For further information concerning this matter, please call:	
Melody Camut Name of Contact Person	at (410) 963-8677 Area Code Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPAR \$125.00 Filing Fee \$130 00 Filing Fee & Certificate of S	□ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate

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

Virginia whetion where the law of	name adopted for the purpose of tran			35 - 363 (17) number		
	- no+ don (Date first transacted business (See sections 605 0904 & 605		ess in	FL yet	-	
	-olden Beach		6. 416	Golden	Buch 1	Blvd
Venice,	FL 34285	<u> </u>	Venic	e, FL	34295	5
				· · · · · ·		
ne and <u>street addre</u>	ss of Florida registered ag	ent: (P.O. Box <u>NO</u>	T_acceptable)			122 JUH
Name:	Melody 416 Gold	Camut				13 PH
Office Address:	416 Gold	en Beach	Blud		· · ·	<u>∵</u>
	Veni	(City)	, Flor	ida 3428 (Zip code)	5	0
	otance:	-				

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: Manager Manager Address: 416 Golden Beach Blud Member Member Venice PL 34285 Venice FL Authorized Authorized Person Person □Other____ Other Other_____ □Other____ Name: ______ Name: _____ □Manager □Manager Address: □Member Address: ☐ Member ☐ Authorized □ Authorized Person Person ☐ Other____ □Other ___ ___ Other □Other____ Name: _____ □Manager Name: _____ □Manager Address: Address: □Member □Member □ 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.

Signature of an authorized person

Typed or printed name of signee

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

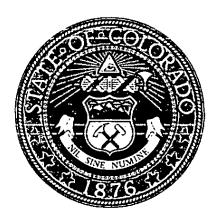
I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Camuti Brothers Rentals, LLC

is an entity formed or registered under the law of Virginia has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20208102175.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 06/07/2022 that have been posted, and by documents delivered to this office electronically through 06/09/2022 @ 07:22:12.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 06/09/2022 @ 07:22:12 in accordance with applicable law. This certificate is assigned Confirmation Number 14079999



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.vos.state.co.us/biz/Certificate/Search/Cuteria do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.vos.state.co.us/click/Businesses, trademarks, trade names" and select "Frequently Asked Questions."