# M22000017944

•••	(Requestor's Name)			
	(Address)			
· · · · · · · · · · · · · · · · · · ·	(Address)			
	(City/State/Zip/Phone #)	<u>.</u>		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of	Status		
Special Instructions to Filing Officer				
		<u> </u>		

Office Use Only



200398329832

2022 DEC -2 PM 12: 0:

APPROVED FILED

2022 DEC -2 PM 2: 1

K. Brampyes

## **CT CORP**

### 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

12/02/2022

D	12/02/2022	- will
	Acc#I20160000072	4: ( ) = V
Name:	8053 Wesley Chapel Blvd, LLC	
Document #:		
Order #:	4653976	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good		
Standing: Certified Copy of	<u> </u>	
Apostille/Notarial Certification:	Country of Destination:  Number of Certs:	
Filing: 🗸	Certified:  Plain:  COGS:	
Availability  Document  Examiner  Updater  Verifier  W.P. Verifier  Ref#	Amount: \$ 125.00	
	( Thank you! )	

#### COVER LETTER

TO: Registration Section Division of Corporations	
28053 Wesley Chapel Blvd, LLC SUBJECT:	
	ited Liability Company
	y for Authorization to Transact Business in Florida," Certificate of ed foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the fol	lowing:
Michael Braunstein, E	SQ.
Braunstein Tuykish 1	Company
7600 Jericho Turnpike	Suit 402 ddress
Woodpuny, New York City/State	N797 and Zip Code
MYAUN'TUNTUYKISh E-mail address: (to be used for	COM r future annual report notification)
For further information concerning this matter, please call:	
Michael Byaunstein, Eyg. a	( 510 ) 802-0-100 Area Code Daytime Telephone Number
Registration Section R Division of Corporations D P.O. Box 6327 T Tallahassee, FL 32314	reet Address: egistration Section ivision of Corporations he Centre of Tallahassee 115 N. Monroe Street, Suite 810 allahassee, FL 32303
Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DEPARTM  \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate

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

#### Registered agent's acceptance:

Office Address:

Plantation

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.

В <u>у:</u>	C T Corporation System	Theresa Buck, Assistant Secretary
	(Registered agent's signature)	

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: RODEYT WIMI Manager Manager Address: 1412 BMadway Address: □Member □ Member ☐ Authorized □ Authorized 400 HOYK. 174 10018 Person Person Other\_\_ Other\_\_\_\_ Other\_\_\_\_ Other\_\_\_\_ Name: ☐ Manager Name: \_\_\_\_\_ □Manager □Member □Member Address: Authorized □ Authorized Person Person Other\_\_\_\_ □Other\_\_\_\_ Other\_\_\_\_ Other\_ Name: \_\_\_\_\_ Name: \_\_\_\_\_ □Маладег □Manager Address: □Member Address: ☐ 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 (F) (b), Flyida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a ford degratelony as provided for in s.817.155, F.S. Signature of an authorized person

Robert Adjmi

Typed or printed name of signer

Page 1



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

DELAWARE, DO HEREBY CERTIFY "28053 WESLEY CHAPEL BLVD, 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 THIRTIETH DAY OF NOVEMBER, A.D. 2022.

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

Authentication: 204964777

Date: 11-30-22