

M20000010504

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

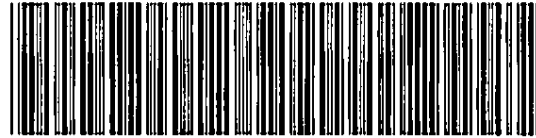
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Rec'd return
11-17-20/
Mel
Solomon
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Office Use Only



200354372582

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NOV 02 2020

11/03/20--01002--014 **130.00

FILED
2020 NOV 17 AM 8:55
FBI - NEW YORK

NOV 18 2020

M. SOLOMON

November 18, 2020

To whom it may concern,

It was our intention to file a foreign LLC, we mistakenly filed a Florida LLC, please release the name of the Florida LLC to the pending foreign LLC filing.

Sincerely,

Alan Pohl

2 Dogs LLC

E: naplesbeachproperties@gmail.com

M: 248.910.9445

FILED
2020 NOV 17 AM 8:55
CLERK OF COURT
CLERK OF COURT

**WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE
STATE OF FLORIDA**

We, the undersigned, do hereby certify that I am the Authorized Person

of **2 Dogs LLC**

(Name of Limited Liability Company)

a limited liability company duly organized and existing under the laws of

Deleware

(State or Country of Organization)

Because the name of this foreign limited liability company does not satisfy the

requirements of the s. 605.0112, F.S., the limited liability company hereby adopts the

following name to transact business in the state of Florida:

Too Many Dogs LLC

(Name to be used by limited liability company in Florida. NOTE: Name must contain Limited Liability Company, L.L.C., or LLC.)

Alan Pohl

Digitally signed by Alan Pohl

Date: 2020.10.22 15:58:59 -04'00'

10/22/2020

Signature Authorized Person

Date

2020 NOV 17 AM 8:55
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CLERK OF COURT
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 2 Dogs LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Alan Pohl

Name of Person

2 Dogs LLC

Firm/Company

2885 Sanford Ave S.W. PMB #22444

Address

Grandville, Mi. 49418

City/State and Zip Code

naplesbeachproperties@gmail.com

E-mail address: (to be used for future annual report notification)

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CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE SEVENTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Alan Pohl

248

910-9445

Name of Contact Person

at ()

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
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:

1. 2 Dogs LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Too Many Dogs 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. Deleware 3. 35-2568880
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. _____ 6. 2885 Sanford Ave S. W.
(Street Address of Principal Office) (Mailing Address)

PMB #22444

Grandville, Mi. 49418

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

Name: Dennis Kopitz

Office Address: 14826 Windward Lane

Naples, Florida 34114
(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.

Dennis Kopitz
(Registered agent's signature)

2020 NOV 17 AM 8:55
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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]:

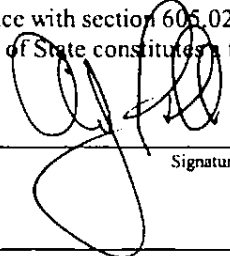
<u>Title or Capacity:</u>		<u>Name and Address:</u>		<u>Title or Capacity:</u>		<u>Name and Address:</u>	
☒ Manager	Name:	Dennis Kopitz		☒ Manager	Name:	Alan Pohl	
☒ Member	Address:	14826 Windward Lane		☒ Member	Address:	301 Antrim Street	
☒ Authorized		Naples, FL 34114		☒ Authorized		Charlevoix, MI 49720	
	Person				Person		
☐ Other		☐ Other		☐ Other		☐ Other	
☐ Manager	Name:			☐ Manager	Name:		
☐ Member	Address:			☐ Member	Address:		
☐ Authorized				☐ Authorized			
	Person				Person		
☐ Other		☐ Other		☐ Other		☐ Other	
☐ Manager	Name:			☐ Manager	Name:		
☐ Member	Address:			☐ Member	Address:		
☐ Authorized				☐ Authorized			
	Person				Person		
☐ Other		☐ Other		☐ Other		☐ Other	

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CLERK OF CIRCUIT COURT
JANICE L. BROWN, CLERK

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.



Signature of an authorized person

Alan J. Pohl

Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "2 DOGS 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 SECOND DAY OF OCTOBER, A.D. 2020.



A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

6095826 8300

SR# 20207573024

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203785441

Date: 10-02-20



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 10, 2020

ALAN POHL
2885 SANFORD AVE SE PMB #22444
GRANDVILLE, MI 49418 US

SUBJECT: 2 DOGS LLC
Ref. Number: W20000128967

We have received your document for 2 DOGS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

Please list the complete principal office address.

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: 020A00022453