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S. ROBERTS

JUL 2 0 2022

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

IN COMPLIANCE WITH SECTION 605 09/12, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: ABCD FL INVESTMENTS LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L L.C.," or "LLC.") Delaware 88-3014875 (Jurisdiction under the law of which foreign timited liability company it organized) (FEI number, if applicable) (Date first transacted business in Plorida, if penar to registration.) (Suo suctions 605,0904 & 605,0905, F.S. to determine penalty liability) 3524 Silverside Road, Suite 35B P.O. Box 3616 5. (Street Address of Principal Office) (Mailing Address) Wilmington, DE 19810 Woodbridge, CT 06525 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Jeffrey Feinberg, Esq. Name: 4651 Shoridan Street, Suite 200 Office Address: Hollywood (City) 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 us 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

(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:
□Manager	Name: ABCD Real Estate LLC	□Manager	Name:	
≣ Member	Address: P.O. Box 3616	□Member	Address:	
□Authorized	Woodbridge, CT 06525	□Authorized		
Person		Person		
□Other	Other	Other		□Other
□ Manager	Name: Menachem Gurevitch	□Manager	Name:	
□Member	Address: P.O. Box 3616	□M¢mber		
□Authorized	Woodbridge, CT 06525	□ Authorized		
Person		Person		
Managing N	16mbc □Other □	□Other		Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		Mauthorized		
Person		Person		
[]Other	Other	□Other	.	□ Othor

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), Plorida Statutes, I am aware that any false information submitted in a document to the Qepartment of State constitutes a third degree fellony as provided for in 8.817.155, F.S.

Signature of an wulburized person

Menachem Gurevitch

Typed or printed same of signee

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "ABCD FL INVESTMENTS 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 ELEVENTH DAY OF JULY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ABCD FL

INVESTMENTS LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF JUNE, A.D.

2022.

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

6879624 8300 SR# 20222956694

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

Authentication: 203885288

Date: 07-11-22

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