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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

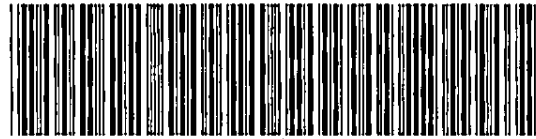
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 APR -7 PM 3:05
CLERK OF STATE
TALLAHASSEE, FLORIDA

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APR 13 2020

M. SOLOMON

SACHER, MARTINI & SACHER, P.A.

2655 Felton Road, Suite 1101, Coral Gables, Florida 33134

Telephone: 305-448-9200 • Facsimile: 305-448-9206

April 6, 2020

Melissa R. Smith
Nicole E. Urbani

Via Federal Express,
Tracking # 8071 5201 5179 0215

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

Re: BILKARLOR, LTD.
Our File No. 1914-11-4

Dear Sir/Madam:

On behalf of the above-referenced Delaware limited partnership, I enclose herewith the original fully executed Application by Foreign Limited Partnership or Limited Liability Limited Partnership for Authorization to Transact Business in Florida, together with our firm check in the amount of \$1,000.

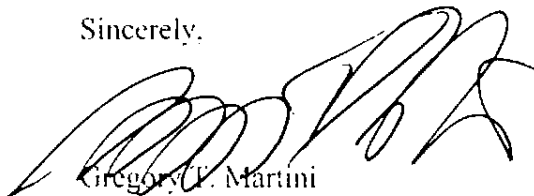
Please have the original copy of the Application filed among the corporate records of the State of Florida.

The check enclosed herein is in payment of the following fees or charges:

Filing Fee	\$1,000.00
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Thank you for your attention to this matter.

Sincerely,



Gregory F. Martini

GTM:mrs
Enclosures
cc: (via email only)

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA**

1. BILKARLOR, LTD.

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.

2. Delaware

State or Country of Formation

3. June 7, 2002

Date of Formation

4. Federal Employer Identification Number: 20-0803113

5. Name of Registered Agent for Service of Process and Florida Street Address:

Gregory T. Martini

2655 LeJeune Road, Suite 1101

Coral Gables, Florida 33134

6. 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.


Signature of Registered Agent

7. Principal Office:

5005 Serena Circle

Tarzana, California 91356

8. Mailing Address:

c/o Karen Grossman Getelman

5005 Serena Circle

Tarzana, California 91356

SECRETARY OF STATE
OFFICE OF THE SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 APR -7 PM 3:05

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9. If limited partnership is a limited liability limited partnership, check box. ☐

10. Name, principal office address, and mailing address of each general partner:

Name of General Partner: Phoophie General Partner, Inc.

Name of General Partner: _____

Street Address: 5005 Serena Circle

Street Address: _____

Tarzana, California 91356

Mailing Address: 5005 Serena Circle

Mailing Address: _____

Tarzana, California 91356

Name of General Partner: _____

Name of General Partner: _____

Street Address: _____

Street Address: _____

Mailing Address: _____

Mailing Address: _____

Name of General Partner: _____ Name of General Partner: _____

Street Address: _____ Street Address: _____

Mailing Address: _____ Mailing Address: _____

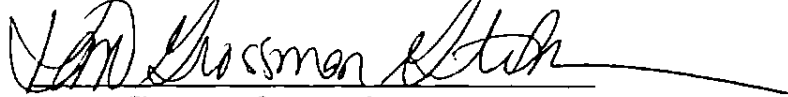
11. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 20th day of March, 2020



Signature of a general partner

By: Karen Grossman Getelman, President of Phoophie General Partner, Inc.

The individual signing this document affirms that the facts stated herein are true and the individual is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in §.817.155, F.S.

Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BILKARLOR, LTD., A DELAWARE LIMITED PARTNERSHIP" 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 TWENTY-FOURTH DAY OF MARCH, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BILKARLOR, LTD., A DELAWARE LIMITED PARTNERSHIP" WAS FORMED ON THE SEVENTH DAY OF JUNE, A.D. 2002.

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



3534597 8300

SR# 20202284534

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

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

Authentication: 202643109

Date: 03-24-20