F1900003450

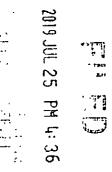
(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	y/State/Zip/Phone	:#)
PICK-UP	☐ WAIT	MAIL
(Bu	rsiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		;
1		





900330271619

08/17/19--01605--015 **210.06



Mrsey



June 26, 2019

ADI H RAHATLEV 3804 SW 49TH PLACE FORT LAUDERDALE, FL 33312

SUBJECT: LEV PROPERTIES INC Ref. Number: W19000060189

We have received your document for LEV PROPERTIES INC and your check(s) totaling \$210.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document number of the name conflict is L16000188564.

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.

Brooke N Kinsey Regulatory Specialist II

Letter Number: 819A00013009

RECEIVED

JUL 25 2019

COVER LETTER

TO:	Registration S Division of C					
CIIDI	LEV PE	ROPERTIES INC				
SORI	ECT:	Name	of corporati	on -	must include suffix	
Dear S	iir or Madam;					
"Certi	ficate of Exister		te of Good Si	lanc	ling" and check are sul	net Business in Florida," omitted to register the
	return all corre H RAHATLEV	spondence concer	ning this mat	ter !	to the following:	
			Name o	of P	erson	
			Firm/Co	omp	anv	
3804	SW 49th PLACE	:		·		
FORT	LAUDERDALI	E FL 33312	Ade	dres	s	
			City/State	and	d Zip code	
	<u>-</u>	E-mail addre	ss: (to be use	d fo	r future annual report	notification)
For fur	ther information	n concerning this	matter, please	e ca	11:	
		305		900-7525		
	Name of Pers	on	Area Co	ode	Daytime Telep	hone Number
Enclose	Registration S Division of Co Clifton Buildin 2661 Executiv Tallahassee, F	orporations ng e Center Circle			MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7
3 \$70	.00 Filing Fee	☐ \$78.75 Fili Certificate	-		\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee. Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. <u>LEV PROPER</u>				
(Enter name of c	orporation; must include "INCORPORATED, orp.," "Inc.," "Co.," or "Corp.,")	" "COMPANY," "CORPORATION	,"	
пс., со., с	orp, me, co, or corp. y			
	IENT PROPERTIES CORP.		1 1 1 1 1 1 1	
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of transacting	g business in Florida)	
2. WYOMING	y under the law of which it is incorporated)	84-2084909		
(State or countr	y under the law of which it is incorporated)	(FEI number, if app	olicable)	
4. 06/12/2019	5			
· · · 	of incorporation)	(Date of duration, if other	than perpetual)	
6.				
0.	(Date first transacted business	in Florida, if prior to registration)		
	(SEE SECTIONS 607.1501 & 607.1	502, F.S., to determine penalty liability	ty)	
7 3804 SW 49 PL	ACE FORT LAUDERDALE FL 33312			
,, <u></u>		ipal office address)		
	(Current mail	ing address, if different)		
	,	,	20	
8 Name and stree	et address of Florida registered agent: (P.	O. Box NOT accentable)	2019 JUL	c. 753
Traine and gares	ecunicas of final regulation agent. (1.			1
Name:	ADI RAHATLEV		25	***
Office Address:	3804 SW 49 PLACE		•	17
Office Address.	JOHAN 471 BACE	• • • •		1 cm
	FORT LAUDERDALE	, Florida <u>33312</u>	- .	المحددة
	(City)	(Zip code)	37	
0 Panistared on	ent's acceptance:			
**	ent's acceptance. ied as registered agent and to accept ser	vice of process for the above state	d corporation at the	place
designated in this	application, I hereby accept the appoin	tment as registered agent and agr	ee to act in this capa	icity. I
	comply with the provisions of all statutes			ıy
duties, and I am j	familiar with and accept the obligations	of my position as registered agent	<u>.</u>	
		~··1		
_	(n. · · / -	Tagent's signature)		
	(Kegisteree	i agent s signature)		

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIR	ECTORS			
Chairmai	n:			
Address:				
Vice Cha	úrman:			
Director:				
, ten ess.				
Director:				-
				——————————————————————————————————————
Address.				
B. OFF	TICERS			
	MIRIAM D RATLEV			
	3804 SW 49 PLACE			
Address.	FORT LAUDERDALE FL 33312	·	2019	
Vice Pres	OREN RAHATLEV		inr 6	
	3804 SW 49 PLACE		25	स्थान स्थानन
Address.	FORT LAUDERDALE FL 33312		PH	:77
Secretary	ADI H RAHATLEV	<u></u>	<u></u>	
	3804 SW 49 PLACE FORT LAUDERDALE FL 33312		7	
NOTE	If page care, you may attach an addaydum to the application listing addition	al officers and/or d	irectors	S.
12	1			
are true a a third do	Signature of Director or Officer cer or director signing this document (and who is listed in number 11 above) and that he or she is aware that false information submitted in a document to egree felony as provided for in s.817.155, F.S. H RAHATLEV SECRETARY			

STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

LEV PROPERTIES INC

is a

Profit Corporation

formed or qualified under the laws of Wyoming did on **June 12, 2019**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2019-000861046**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 13th day of June, 2019 at 1:54 PM. This certificate is assigned 031474131.

Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.