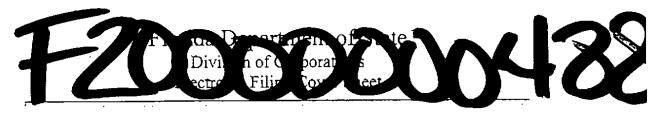
Division of Corporations

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(((H20000029944 3)))



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From:

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Account Number : 075350000132 Phone : (305)374-7590 Fax Number : (305)351-2122

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Foreign Limited Liability Company ORANGE CITY SDC, LLC

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

IN COMPLIANCE WITH SEC COMPANY TO TRANSACT BU	TION 605.0902, FLORIDA STATUTES, THE F SINESS INTHE STATE OF FLORIDA:	FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN 	! LIMITED LIABILITY
, ORANGE CITY S		ect Liability Company," "L. L.C.," or "LLC.")	
(If name unavailable, onter alternate n	ume adopted for the purpose of transacting business in F	orida. The alternate name must include "Limited Limbibry Company." "	TE C(" or "LLC;")
2. Delaware (Jurisdiction under the law of w	hich foreign limited liability company is organized)	3. · (FEI number, if applicable)	
4	(Date first transacted business in Elonida, if prior t (See sections 603.0904 & 605.0903, F.S. to determ	o registration.) nina penalty liability)	
5. c/o Saglo Develo	pment Corporation	6. c/o Saglo Development Corpor	ation
(Sizee: Address of 290 NW 165th St		290 NW 165th Street, Suite PH	12
Miami, FL 33169		Miami, FL 33169	
7. Name and street address	ss of Florida registered agent: (P.O. Bo	x <u>NOT</u> acceptable)	
Name:	Jack Glottmann		2020
Office Address:	/- Coals Douglooment Corneration, 200 NW 165th Street, Stiffe FHZ		
	Miami	Florida 33169 (Zip code)	2
to comply with the provis	tions of all statutes relative to the properts of my position as registered agent. /8/Jack Glottmann	as registered agent and agree to act in this capacer and complete performance of my duties, and I	am familiar with
	(Registered agent	's signature)	
8. The name, title or cap <u>Title or Capacity:</u>	acity and address of the person(s) who Name and Address:	has/have authority to manage is/are: <u>Title or Capacity:</u> <u>Name and</u>	l Address:
Member	2019 SDC, LLC		
	c/o Saglo Development Corpora	tion	 _
	290 NW 165th Street, Suite F	<u></u>	
	Miami, Florida 33169		<u></u>
(Use attachments if neces	ssary)	<u> </u>	 .
9. Attached is a certificate jurisdiction under the law of the translator must be s	of which it is organized. (If the certific	l, duly authenticated by the official having custody ate is in a foreign language, a translation of the cer	of records in the tificate under oath
10. This document is executed in a document to	cuted in accordance with section 605.02 to the Department of State constitutes a	03 (1) (b), Florida Statutes. I am aware that any fal- third degree felony as provided for in s.\$17.155, F.	se information S.
	/s/Jack Glottmann		
	Signan	are of an authorized person	
	Jack Glottmann		
	Turner	or minted name of tience	

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Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "ORANGE CITY SDC, 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 TWENTY-THIRD DAY OF JANUARY, A.D. 2020.

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



Authentication: 202247979

Date: 01-23-20