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APPROVED AND FILED



AUG 0 5 2023 K. Brumbley

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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

08/04/2023

NAME:

REAL LURRA US VI INC

TYPE OF FILING: APPLICATION

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ACCOUNT: **FCA00000015** 

**AUTHORIZATION: ABBIE/PAUL HODGE** 

## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: Real Lurra US VI Inc.				
	corporation - mi	ist include suffix		
Dear Sir or Madam:				
The enclosed "Application by Foreign Corpo "Certificate of Existence," or "Certificate of above referenced foreign corporation to trans	Good Standing	and check are sub-		
Please return all correspondence concerning	this matter to th	e following:		
Jordyn Kaplan				
	Name of Perso	on		
Litwin Kach LLP				
	Firm/Company	,		
200 N. LaSalle St, Suite 1550				
	Address	-		
Chicago, IL 60601				
C	ity/State and Z	p code		
paralegal@litwinkach.com				
E-mail address: (t	o be used for fu	ture annual report n	otification)	
For further information concerning this matter	er, please call:			
Jordyn Kaplan	$(\frac{312}{})^{\frac{2}{}}$	281-8853		
Name of Person		Daytime Telepi	none Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the following amount Please make check payable to: FLORIDA DEPA  \$70.00 Filing Fee \$78.75 Filing F  Certificate of S	<b>RTMENT OF</b> 5 cc & □ \$78	STATE 1.75 Filing Fee & rtified 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.

(State or country under the law of which it is incorporated)  (State or country under the law of which it is incorporated)  (Date of incorporation)  (Date of duration, if other than perpetude of incorporate durants and incorporate service incorporate (Picture of Incorporate Service Inc.)  (Date of duration, if other than perpetude of incorporate service incorporate (Picture of Incorporate Service Inc.)  (Date of duration, if other than perpetude of incorporate service incorporate service incorporate (Picture of Incorporate Service Inc.)  (Date of duration, if other than perpetude of incorporate service i	(Date of incorporation) (Date of duration, if other than perpetual) ansacted business in Florida.  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) gan Ave., Suite 700 #322, Miami Beach, FL 33139  (Principal office street address)
(Date of incorporation)  (Date of duration, if other than perpetu  Has not transacted business in Florida.  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  1680 Michigan Ave., Suite 700 #322, Miami Beach, FL 33139  (Principal office street address)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	(Date of incorporation) (Date of duration, if other than perpetual) ansacted business in Florida.  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) gan Ave., Suite 700 #322, Miami Beach, FL 33139  (Principal office street address)
(Date of incorporation)  (Date of duration, if other than perpetu  Has not transacted business in Florida.  (Date first transacted business in Florida, if prior to registration)  (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  1680 Michigan Ave., Suite 700 #322, Miami Beach, FL 33139  (Principal office street address)  (Current mailing address, if different)	(Date of incorporation) (Date of duration, if other than perpetual) ansacted business in Florida.  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) gan Ave., Suite 700 #322, Miami Beach, FL 33139  (Principal office street address)
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(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  1680 Michigan Ave., Suite 700 #322, Miami Beach, FL 33139  (Principal office street address)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) gan Ave., Suite 700 #322, Miami Beach, FL 33139  (Principal office street address)
(Current mailing address, if different)  (Current mailing address, if different)  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	(Principal office street address)
(Current mailing address, if different)    Current mailing address, if different	(Current mailing address if different)
Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	(Current mailing address, if different)
Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)	(Current mailing address, if different)
Legaline Corporate Service Inc.	23 A
Legaline Corporate Service Inc.	
Name: Legaline Corporate Service Inc.	street address of Florida registered agent: (P.O. Box NOT acceptable)
	ne: Legalinc Corporate Service Inc.
ice Address:	476 Riverside Ave.
Jacksonville 32202	22202
	, Florida
(City) (Zip code)	(City) (Zip code)

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.

A. DIRECTORS				
□Chairman	Name: Paul Coelho	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director	1680 Michigan Ave., Suite 700 #322	□Director		
President	Miami Beach, FL 33139	□President		
□Vice President		□ Vice President		
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer
Other	Other	□Other		□Other
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	□Secretary		□Treasurer
Other	Other	Other		Other
□ Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director	· <del>-</del> ··	□Director		
□President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	☐ Secretary		□Treasurer
Other	Other	□Other		Other
individuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Department of Direct Signature	artment of State Annual Rep	oort form.	

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

Paul Coelho, President



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

DELAWARE, DO HEREBY CERTIFY "REAL LURRA US VI INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF JULY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REAL LURRA US VIINC." WAS INCORPORATED ON THE ELEVENTH DAY OF JULY, A.D. 2022.

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



Authentication: 203831454

Jeffrey W. Buffock, Secretary of State

Date: 07-26-23

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SR# 20233090222