# F240000033/2

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(Requestor's Name)	
(Address)	_
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PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Cashidas Lini)	
(Document Number)	
Certified Copies Certificates of Status	_
Consideration As Siling Officer	٦
Special Instructions to Filing Officer:	1
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Office Use Only



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#### **COVER LETTER**

TO: Registration Section

	aag LLC	
SUBJECT:	Name	e of Limited Liability Company
		Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida
Please return all	correspondence concerning this matter to	o the following:
	Sheldon Haag	
	,	Name of Person
	Haag LLC	
	<del></del>	Firm/Company
	41 Lake road	
		Address
	Middlefield CT 06455	
	C	ity/State and Zip Code
	SheldonHaag@gmail.com	
		used for future annual report notification)
For further info	rmation concerning this matter, please cal	li:
Sheldo	on Haug	860 908-3153 at ( )
	Name of Contact Person	at () Area Code Daytime Telephone Number
	g Address:	Street Address: Registration Section
Registration Section Division of Corporations		Division of Corporations
	Box 6327	The Centre of Tallahassee
	nassee, FL 32314	2415 N. Monroe Street, Suite 810
		Tallahassee, FL 32303
	ed is a check for the following amount: make check payable to: FLORIDA DEP	A DTMENT OF STATE
_	5.00 Filing Fee  \$130.00 Filing Fee	_
	Certificate of	

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Haag FL LLC			
It name unavailable, enter alternate	name adopted for the purpose of transacting business in Flo	ida. The alternate name must include "Limited Liability (	Company," "E.L.C," or "ELC.")
Connecticut		87-3063429 3.	
(Jurisdiction under the law of w	hich foreign limited fiability company is organized)	3. (FEI number, if a	oplicable)
07/14/2024 I.			
··	(Date first transacted business in Florida, if prior to re (See sections 605.0904 & 605.0905, F.S. to determin	gistration.) penalty lighthty)	-
85 Neipsie rd		41 Lake rd	
Street Address of Principal Office)		6. (Mailing Address)	
Glastonbury CT 06033		Middlefield CT 06455	
. Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)	7.07
Name:	Austin Bergman		1 HAST 6777
Office Address:	2301 NE 16th		F .
Office Address:			

#### 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 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.

(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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name: Sheldon Haag Name: □Manager ■ Manager 41 Lake Road Address: □Member □Member Address: Middlefield CT 06455 □ Authorized □ Authorized Person Person □Other\_\_\_\_\_ □Other\_\_\_\_ □ Other □Other Name: \_\_\_\_\_\_ □ Manager Name: \_\_\_\_\_ □Manager □Member Address: □Member Address: □ Authorized □ Authorized Person Person □Other\_\_\_\_\_ []Other\_\_\_\_ Other\_\_\_\_ □Other Name: □ Manager ☐ Manager Name: \_\_\_\_\_ Address: \_\_\_\_\_ □Member □Member Address: □ Authorized □ Authorized Person Person □Other\_\_\_\_\_ Other\_\_\_\_ □Other\_\_\_ Other\_\_\_\_

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), Florida Statutes, I am aware that any 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.

Short & Arm	
	Signature of an authorized person
Sheldon Haag	
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## Secretary of the State of Connecticut Certificate of Legal Existence

Certificate of Legal Existence Certificate

Date Issued: Friday, June 07, 2024 10:45 AM

I, the Connecticut Secretary of the State, and keeper of the seal thereof, do hereby certify, that the certificate of organization for the below domestic limited liability company was filed in this office.

A certificate of dissolution has not been filed, and so far, as indicated by the records of this office, such limited liability company is in existence.

#### **Business Details**

Business Name	Haag, LLC		•		 
Business ALEI	US-CT.BER:2358031	 			
Formation Date	10/05/2021				 

#### Filing History

Filing Type	Filing Date & Time	Effective Date & Time
Certificate of Organization	10/5/2021	
Annual Report(2022)	06/19/2023 09:41 AM	
Annual Report(2023)	01/18/2024 04:00 PM	
Annual Report(2024)	01/18/2024 04:08 PM	· · · · · · · · · · · · · · · · · · ·

Secretary of the State

Business ALEI: US-CT.BER:2358031

Note: To verify this certificate, visit Business.ct.gov

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