CASOOS GRAND Tof 1

Florida Department of State

Division of Corporations

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(((H06000260870 3)))



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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

: THE LAW OFFICES OF MAX A. ADAMS, ESQ. Account Name

Account Number : I20050000131 Phone : (305)887-9060

Pax Number : (305)888-3192

FLORIDA/FOREIGN LIMITED LIABILITY CO. CRI Ventures, LLC

> Certificate of Status Certified Copy Page Count 05 Estimated Charge \$125.00

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COVER LETTER

TO:	Registration Section
	Division of Corporations
	Division of Corporation

SUBJECT: CRI Ven-tures: LLC
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:	226
Deidre Garces	2006 OCT 25
(Name of Person)	RY OF
The Law Offices of Max A. Adams, Esq.	19: 45 19: 45
(Firm/Company)	記が
1400 NW 10th Ave., Swite 1211	
(Address)	
Miami, FL 33136	
(City/State and Zip Code)	

For further information concerning this matter, please call:

Deidre Garces	at (305) 887-9060
(Name of Person)	(Area Code & Daytime Telephone Number)

MAILING ADDRESS:

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS:
Division of Corporations
Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the	following amount:		
	□\$130.00 Filing Fee &	□\$155.00 Filing Fee &	☐\$160.00 Filing Fee, Certificate
	Certificate of S	tatus Certified Copy	of Status & Certified Copy

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H06000260870-48213-3/5

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

	YCOMPANYTOTRAN	ACT BUSINESS IN T			TO REGISTER A FOREIGN
LK_L	. Venture	ne of Poreign Limit	ed Liability Comp	any)	
Jurisdiction un company is org	ware U der the law of which f	S.A.	3	(FEI number, if applie	cable)
_10-0	1 - 2005 Date of Organization)	· .	5. (Duration: exist or "p	Penoctus Year limited liability con	mpany will cease to
10	- 210 - 20 (Date first t	msacted business in 608.501 & 608.502	-		7208 O
	1881 L	2005.301 & 600.302	Λ	# 7 H	OCT 25 CRETARS
	Miami	(Street Addr	ess of Principal O	33139 ma)	EEE FLO
If limited li	ability company is	a manager-manag	ged company, c	heck here	55 ES
The name a	nd usual business a	- -	nanaging memb	ers or managers are a	as follows:
1881	Washi	naton 1	Ave.,	<u>#7н</u>	
$-\mathbf{M}$	iami Be	ach, Fc	<u>3313</u>	9	
e jurisdiction un	original certificate of ea der the law of which it i certificate under cath of	organized. (A photo	copy is not accepts	uthenticated by the official ble. If the certificate is in a	l having custody of records in a foreign language, a
1. Nature of				n Florida: Prop	erty
DWN	ership (<u>ind ma</u>	nageme	<u>nt.</u>	
	(In accordance	with section 608,408	(3), F.S., the execution	presentative of a mem on of this document constitu- is stated herein are true.)	aber.
	Max A.	Adams, Esc Typed or pri	as atto fixed name of si	rney-in-Fact	<u>tor</u>
	Clara	Rodriguez	Iznaga,	managing-r	nember

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:		
CRI Ventures, LIC		
2. The name and the Florida street address of the registered agent and office are:	SECRE TALLAH	77
Clara Rodriguez Iznaga	TARY HASSE	
1881 Washington Ave #7H	AH 9: EFLOT	Lamps of the Lamps
Florida Street Address (P.O. Box NOT ACCEPTABLE)	RIE 45	
Miami Beach FL 33139		

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Max A. Adams, Esq., as attorney-in-Fact For

Uara Rodriguez-Iznaga, registered agent/managing member

\$100.00 Filing Fee for Application
\$25.00 Designation of Registered Agent
\$30.00 Certified Copy (optional)
\$5.00 Certificate of Status (optional)

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H 06000260870-3^{No. 4821} Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CRI VENTURES, 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 ELEVENTH DAY OF OCTOBER, A.D. 2006.

8300 4046431

060883863

DATE: 10-11-06

AUTHENTICATION: 5105485

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