# M 2000002055

(Rec	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	me)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		



900227841299

04/11/12--01020--001 \*+160.00

B. KOHR

APR 1 3 2012

**EXAMINER** 

#### **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJE		·· · · · · · · · · · · · · · · · · · ·	
	Na	me of Limited Liability Company	,
	closed "Application by Foreign Limited Liab ice, and check are submitted to register the a		
Please	return all correspondence concerning this ma	atter to the following:	
	Abraham Abittan		
		Name of Person	
	Hillsborough Glass Pros t	_LC	
		Firm/Company	
	7320 East Fletcher Ave	nue	
		Address	
	Tampa, FL 33637		
		City/State and Zip Code	
	gomezalphonso@yma	ail.com to be used for future annual repo	rt notification)
For fur	ther information concerning this matter, plea	·	<b>,</b>
	Abraham Abittan	<sub>at (</sub> 813 <sub>)</sub> 5	69-6528
	Name of Person	Area Code & Daytime Tele	ephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclos	sed is a check for the following amount \$125.00 Filing Fee \$130.00 Filing Fee Certificate of States	ee & \$\inf\$155.00 Filing Fee &	\$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Hillsborough Glass Pros, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writte consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)
4. March 21, 2012  (Date of Organization)  5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. Pending  (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 7320 East Fletcher Avenue
Tampa, FL 33637 (Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here 🗸
9. The name and usual business addresses of the managing members or managers are as follows:
Abbitan DA, LLC
247 Juniper Circle
East Lawrence, NY 11559
10. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida:
Repair and Sale of Auto Glass
le lun
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)
Abraham Abittan

Typed or printed name of signee

## 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:
Hillsborough Glass Pros, LLC
If unavailable, the alternate to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
Incorp Services, Inc.
(Name)
17888 67th Court North
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Loxahatchee FL 33470
City/State/Zip
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.  Services (Signature)
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

## Delaware

PAGE 1

#### The First State

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

DELAWARE, DO HEREBY CERTIFY "HILLSBOROUGH GLASS PROS, 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 TWENTIETH DAY OF MARCH, A.D. 2012.

5127304 8300

120331620

AUTHENTY CATION: 9445166

DATE: 03-20-12

You may verify this certificate online at corp.delaware.gov/authver.shtml