Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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	Division of Co	rporations		41
	Fax Mumber	: (850)617-6383		
From:				
	Account Name	: ADVOCATE CONSULT	ING LEGAL GROUP.	PLLC Co
	Account Number	: I20090000001	,	EDITOR OF
	Phone	: (239)213-0066		

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

: (239)213-0698

Email Address:

Fax Number

Foreign Limited Liability Company Agrest Enterprises, LLC

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Electronic Filing Menu Corporate Filing Menu

Help



June 4, 2014

FLORIDA DEPARTMENT OF STATE

ADVOCATE CONSULTING LEGAL GROUP, PLLC

SUBJECT: AGREST ENTERPRISES, LLC

REF: W14000034645

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Agnes Lunt Regulatory Specialist II FAX Aud. #: H14000129159 Letter Number: 414A00012028

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MALLAHASSEE, FLORINA

Fax: 239+213+0698

Jun 4 2014 04:07pm P003/006

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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: Agrest Enterprises, 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:

Brigette Harms

Name of Person

Advocate Consulting Legal Group, PLLC

Firm/Company

3073 Horseshoe Drive South, Suite 210

Address

Naples, FL 34104

City/State and Zip Code

brigetteh@advocatetax.com

E-mail andress: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brigette Harms

,239

213-0066

Name of Contact Person

Area Code

Daytime Telephone 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

Enclosed is a check for the following amount:

@ \$125.00 Filing Fee

☐ \$130.00 Filing Fee & Certificate of Status

S155.00 Filing Fee & Certified Copy

☐ \$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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Agrest Enterprises, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," of	
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate nuisbility Company, "L.L.C," or "L(C.")	ame must include "Limited
Delaware	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applic company is organized)	able)
(Date first transacted business in Florida, if prior to regisfration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability)	
2750 Northwest 79th Avenue	AND COMMENTS
Miami, FL 33122	69 25 93 25 14 4
(Street Address of Principal Office)	\$**\#\ ******
2750 Northwest 79th Avenue	
Miami, FL 33122	
(Mälling Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to make Herbert Jordan — AMBR 2750 Northwest 79th Avenue	antage (svare;
Miami, FL 33122	
Attached is an original certificate of existence, no more than 90 days old, duly author laving custody of records in the jurisdiction under the law of which it is organized. (A proceptable. If the certificate is in a foreign language, a translation of the certificate under nust be submitted) Signature of an authorized person in accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penaltics of perjunit aware that any false information submitted in a document to Department of State constitutes a third degree falony as provided.	photocopy is not reanslate of the translate
Herbert Jordan	
Typed or printed name of signee	

Jun 4 2014 04:07pm P005/006 (((H14000129159 3)))

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (I)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	of the Limited 1 Enterprise	• •	any is:		
If unavailabl	ie, the alternate to	be used in the	state of Florida is:	***************************************	
2. The name	and the Florida	street address o	of the registered agent and office are:	TANK THE SERVICE OF T	
	Herber	t Jordan	•	211	
	**************************************	· · · · · · · · · · · · · · · · · · ·	(Name)		
	2750 Northwest 79th Avenue				
	1	Florids Street Add	ress (P.O. Box NOT ACCEPTABLE)	UM C	
	Mlami		Fr 33122		
			City/State/Zip		
liability comp registered ag statutes relat	pany at the place gent and agree to ing to the proper	designated in the act in this capa and complete position as regis	to accept service of process for the above shis certificate, I hereby accept the appoint wity. I further agree to comply with the properformance of my duties, and I am familiatered agent as provided for in Chapter 60.	ment as ovisions of all ir with and	
		\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)		

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Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "AGREST ENTERPRISES, 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 THIRTIETH DAY OF MAY, A.D. 2014.

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waify this certificate onlin

Jeffrey W. Bullock, Secretary of State
UTHENTYCATION: 1411329

DATE: 05-30-14

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