

M14000008498

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500266234185

500266234185  
10/23/14--01007--024 \*\*160.00

WMI- 68912

FILED

14 NOV 26 PM 4:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED NOV 26 2014

*The Law Offices of*  
**Snyder & Snyder, P.A.**  
Attorneys and Counselors at Law

---

**WILLIAM A. SNYDER, J.D., LL.M.**

Florida Bar Board Certified — Wills, Trusts & Estates  
Fellow, American College of Trust & Estate Counsel (ACTEC)

**SHAWN C. SNYDER, M.A., J.D., LL.M.**

Florida Bar Board Certified — Wills, Trusts & Estates

**ANNE J. MCPHEE, J.D., LL.M.**

**OLGA I. GALANTER, J.D., LL.M.**

**MONIQUE M. SADARANGANI, J.D., LL.M.**

7931 SW 45<sup>th</sup> Street  
Davie, Florida 33328

Phone: 954-475-1139

Fax: 954-475-2634

[www.snyderlawpa.com](http://www.snyderlawpa.com)

E-Mail: [Olga@snyderlawpa.com](mailto:Olga@snyderlawpa.com)

November 3, 2014

Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Re: *Xerxes Holdings, LLC***  
**Ref. Number: *W14000065037***

Dear Sir/Madam:

Enclosed please find a revised Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for the above referenced entity with an alternate name. I have also sent your letter to us as a reference.

Kindly file the application and return the certified copies to my attention in the pre-stamped envelope provided.

Thank you for your courtesies with this matter. If you have any questions, please feel free to contact me directly.

Very truly yours,

SNYDER & SNYDER, P.A.

  
Olga I. Galanter

OIG:ii  
Encls.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 27, 2014

SNYDER & SNYDER, P.A.  
ATTN: OLGA I. GALANTER  
7931 SW 45TH STREET  
DAVIE, FL 33328

SUBJECT: XERXES HOLDINGS, LLC  
Ref. Number: W14000065037

We have received your document for XERXES HOLDINGS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

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.

Tim Burch  
Regulatory Specialist II

Letter Number: 014A00022900



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 14, 2014

SYNDER & SNYDER, P.A.  
ATTN: OLGA I GALANTER  
7931 SW 45TH STREET  
DAVIE, FL 33328

SUBJECT: XERXES FAMILY HOLDINGS, LLC  
Ref. Number: W14000068912

We have received your document for XERXES FAMILY HOLDINGS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Tim Burch  
Regulatory Specialist II

Letter Number: 814A00024304

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

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

1. Xerxes Holdings, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Xerxes family Holdings, LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. \_\_\_\_\_

(FEI number, if applicable)

4. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1521 Alton Road, #900

Miami Beach, Florida 33139

(Street Address of Principal Office)

6. 1521 Alton Road, #900

Miami Beach, Florida 33139

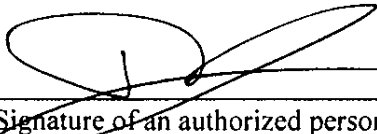
(Mailing Address)

FILED  
14 NOV 26 PM 4:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Tony N. Talebi, Manager 1521 Alton Road, #900, Miami Beach, FL 33139

8. 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)

  
\_\_\_\_\_  
Signature of an authorized person

(In accordance with section 605.0203, 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.)

Tony N. Talebi

Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(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.

1. The name of the Limited Liability Company is:

Xerxes Holdings, LLC

If unavailable, the alternate to be used in the state of Florida is:

Xerxes Family Holdings, LLC

2. The name and the Florida street address of the registered agent and office are:

Shawn C. Snyder, Esq.

(Name)

7931 S.W. 45th Street

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Davie

FL

33328

City/State/Zip

**FILED**  
14 NOV 26 PM 4:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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 605, Florida Statutes.*

  
(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 "XERXES HOLDINGS, 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 SECOND DAY OF SEPTEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "XERXES HOLDINGS, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF AUGUST A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

FILED

14 NOV 26 PM 4:25  
SECRETARY OF STATE  
DELAWARE

5594455 8300

141121972

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1663085

DATE: 09-02-14