Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

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

Email Address:

Foreign Limited Liability Company 47 Robinson Realty, LLC.

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Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

	istration Section sion of Corporations							
SUBJECT:	47 Robinson Realty, LLC.							
	Ne	me of Limited Liab	ility Company					
	"Application by Foreign Limited Lid d check are submitted to register the							
Please return	all correspondence concerning this r	natter to the follow	ving:				2014	
	Gabriel Klein					am (a.) 3 ≈ 34	<u>5</u>	·
	Name of Person					933G) 1 	
47 Robinson Realty, LLC.						S	granes E energisti	
	Firm/Company			2V=	} :			
	47 E. Robinson St.				_		ďŠ.	
		Addr	esi			~~ •••	03	
	Orlando, Fl. 32801		10.0					
		City/State and	d Zip Code					
	altamonte,apt@gmail.com							
	E-mail addres	s: (to be used for fu	ture annual rep	ort notilica	lion)			
For further in	formation concerning this matter, plo	ase call:						
Gab	riel Klein	at (718 Area Code	543-521	9 time Telephone Numb			
	Name of Contact Person		Alea Code					
	LING ADDRESS: tion of Corporations	STREET AD Division of C						
	stration Section	Registration S						
•	Box 6327	Clifton Buildi						
Talla	chassee, FL 32314	2661 Executive Tallahassee, F		cle				
Enclosed is	a check for the following amo	nunt:						
	25.00 Filing Fee \$130.00 Fili Certificate o	ng Fee & 🔲 🕏	155.00 Filing Certified Cop	•	☐ \$160.00 Filing F of Status & Cert		ile	

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:

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "	, n	29
name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate nam		imile
bility Company," "L.L.C," or "LLC.")	1, 11	177
Deleware 3.		
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable company is organized)	e)	ت-
	र विका	707
Upon Qualification	-32 -32	_ =
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	्रा इस्	
AT D. Daking a Co.	egi Em	C
47 E. Robinson St.	*:-	`´
Orlando, Fl. 32801		
(Street Address of Principal Office)		-
47 E. Robinson St.		
T (K. INVIUSU SI.		
Orlando FI 32801		
Orlando, Fl. 32801 (Mailing Address) The name, title or capacity and address of the person(s) who has/have authority to man	age is/are:	~
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(Mailing Address) The name, title or capacity and address of the person(s) who has/have authority to man	age is/are:	
(Mailing Address) The name, title or capacity and address of the person(s) who has/have authority to man abriel Klein - Managing Member - 47 E. Robinson St., Orlando, Fl. 32801		
(Mailing Address) The name, title or capacity and address of the person(s) who has/have authority to man abriel Klein - Managing Member - 47 E. Robinson St., Orlando, Fl. 32801 Attached is an original certificate of existence, no more than 90 days old, duly authenticated.	d huzhe offici	 al .
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(Mailing Address) The name, title or capacity and address of the person(s) who has/have authority to man abriel Klein - Managing Member - 47 E. Robinson St., Orlando, Fl. 32801 Attached is an original certificate of existence, no more than 90 days old, duly authenticated aving custody of records in the jurisdiction under the law of which it is organized. (A photoe ecoptable. If the certificate is in a foreign language, a translation of the certificate under oath must be submitted)	d by the offici opy is not of the translat	tor

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.

i. The name	of the Limited Liability	Company is:		
47 Robinson Realty, 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:		क्षीतः ह्या	21 336 1187	
		K#4681		
			# #	
	C T Corporation System			
		(Name)	•	
	1200 South Pine Island Ro	pad		
	Florida Stre	et Address (P.O. Box NOT ACCEPTABLE)		
	Plantation	FL 33324	_	
	<u> </u>	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 605, Florida Statutes.

By: CT Corporation System De By:

\$ 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 "47 ROBINSON REALTY, 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 FIFTEENTH DAY OF DECEMBER, A.D. 2014.

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

5635276 8300

141536631

DATE: 12-15-14