#115000002087

	<u> </u>	
(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
`	,	
(0)		
(Cit	y/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Eiling Officer	
Special Instructions to	Filing Officer.]
	<u> </u>	

Office Use Only



100269830971

03/20/15--01001--024 **125.00

SUFFICIENCY OF FILING

PH t:

(,)

RECEIVED

FILED
2015 MAR 19 AM 10: 20

K.SALY EXAMINER MAR 2 0 2015

CORPDIRECT AGE 515 EAST PARK AV TALLAHASSEE, FL 222-1173	ENUE	nerly CCRS)	
FILING COVER S ACCT. #FCA-23	SHEET		
CONTACT:	Kim Weidenb	oach_	
DATE:	03/19/15		
REF. #:	9482282		
CORP. NAME:	AMELIA TO	WERS LLC	
() ARTICLES OF INCO () ANNUAL REPORT (XX) FOREIGN QUALI () REINSTATEMENT () CERTIFICATE OF C () OTHER:	FICATION	() ARTICLES OF AMENDMENT () TRADEMARK/SERVICE MARK	
		TH CHECK# 7003731	
		COST LIN	ЛІТ: \$
PLEASE RETUR () CERTIFIED COPY () CERTIFICATE OF	′ ()CE	RTIFICATE OF GOOD STANDING	(XX) PLAIN STAMPED COPY

Examiner's Initials

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; Amelia Towers 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 Plorida. The alternate name must include "Limited Llability Company," "L.L.C," or "LLC.") _{2.} Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 7959 W 28 Ave Hialeah, FL 33016 (Street Address of Principal Office) _{6.} 7959 W 28 Ave Hialeah, FL 33016 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: The Lopez Companies, Inc., Manager 7959 W 28 Ave Hialeah, FL 33016 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)

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.)

Jorge A. Lopez, President, The Lopez Companies. Inc.

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

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

iner i fratt Ette villerett – elegge et eleggeret – eleggever i ver ett ett ett fratter en tillerettet i elegge

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.

	owers LLC		
If unavailable,	the alternate to be used	in the state of Florida is:	
2. The name ar	nd the Florida street add	dress of the registered agent and office are:	TOIS HAR 19
	Jorge A. Lopez		
		(Name)	
	7959 W 28 A	\ve	MO: 28
	Florida Stre	et Address (P.O. Box NOT ACCEPTABLE)	· · · · · · · · · · · · · · · · · · ·
	Hialeah	33016	_
		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.

(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 "AMELIA TOWERS 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 EIGHTEENTH DAY OF MARCH, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AMELIA TOWERS LLC" WAS FORMED ON THE SEVENTEENTH DAY OF MARCH, A.D. 2015.

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

5711923 8300

150371476

Jeffrey W. Bullock, Secretary of State

AUTHENT\(CATION: 2212037\)

DATE: 03-18-15

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