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(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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Special Instructions to Filing Officer:						

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. COVER LETTER

TO: Regis	tration Section ion of Corporations	٠	,				
SUBJECT: _	FINK & DEL INVESTMENTS LLC						
sebjici	Nam	e of Limited Liability	Company	_			
	Application by Foreign Limited Liability C check are submitted to register the above r						
Please return a	ll correspondence concerning this matter to	the following:					
	FRANKLIN DE LA CRUZ						
		Name of Person		-			
	FINK & DEL INVESTMENTS LLC						
	Firm/Company						
	13156 LONG PINE TRAIL						
		Address		-			
	CLERMONT FLORIDA 34711						
	C	ity/State and Zip Code		-			
	franklin@jbf.bz						
	E-mail address: (to be	used for future annual	report notification)	_			
For further info	ormation concerning this matter, please cal	l:					
FRA	NKLIN DE LA CRUZ	773 at (671-5593				
	Name of Contact Person	Area Code	Daytime Telephone Number	-			
Divis Regis	LING ADDRESS: ion of Corporations tration Section Box 6327		STREET ADDRESS: Division of Corporations Registration Section Clifton Building				

Tallahassee, FL 32314

Tallahassee, FL 32301

2661 Executive Center Circle

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee

☐ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 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 TRANSACTER ISINESS INTER STATE OF FLORIDA:

1. FINK & DEL INVEST	MENTS LLC ign Limited Liability Company; mu				
(Name of Fore	ign Limited Liability Company; mu	st inclu	de "Limited Liab	ility Company," "L.L.C.,"	or "LLC.")
(If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for the purpos " or "LLC.")	e of tra	nsacting business	in Florida. The alternate	name must include "Limited
2. ILLINOIS		3	27-1830106		
(Jurisdiction under the law company is organized)	of which foreign limited liability	J.		(FEI number, if applica	ble)
1 .					
	(Date first transacted busine (See sections 605.0904 & 605				
5					
13156 LONG PINE TR	RAIL CLERMONT FL 34711				
	(Street Address of				
	RAIL CLERMONT FL 34711				
 	(Mailing	Addres	s)	 	
7. Name and street addres	s of Florida registered agent: (P	.O. Bo	x NOT accepta	ble)	
Name:	FRANKLIN DE LA CRUZ		•		
Office Address:	13156 LONG PINE TRAIL		_		
•	CLERMONT			, Florida 34711 (Zip code)	
Registered agent's accep				(Zip code)	
this application, I hereby	gistered agent and to accept ser accept the appointment as regis statutes relative to the proper an ition as registered agent.	tered a	igent and agree	to act in this capacity	. I further agree to comply
	(Regis	tered ag	gent's signature)		
8. The name, title or capa Joseph Finkelberg PRES	acity and address of the person(s)) who l	nas/have authori	ty to manage is/are:	
Franklin De La Cruz VIC					
Frankilii De La Ciuz Vic.	E FRESIDENT	<u>-</u> -			
	trantin	ertific		n language, a translatio	
In accordance with section	n 605.0203, F.S., the execution of	of this	document const	itutes an affirmation un	der the penalties of perjury

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

Typed or printed name of signee

degree felony as provided for in s.817.155, F.S.)

FRANKLIN DE LA CRUZ

File Number

0320744-7



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

FINK & DEL INVESTMENTS, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON DECEMBER 21, 2009, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



Authentication #: 1513501642

Authenticate at: http://www.cyberdriveillinois.com

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 15TH

day of

MAY

A.D.

2015

Desse White

SECRETARY OF STATE