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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

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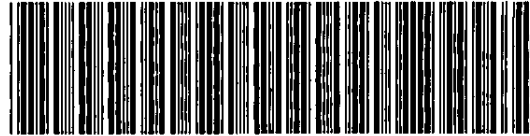
(Business Entity Name)

(Document Number)

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

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TALLAHASSEE, FLORIDA

MAY 27 2015  
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 6, 2015

NATHALIE ANGIBEAU  
117-19 238TH ST  
ELMONT, NY 11003

SUBJECT: ANAT I LLC  
Ref. Number: W15000000585

We have received your document for ANAT I LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the complete principal office address.

Please return the corrected original and one copy of 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.

Justin M Shivers  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 015A00000160

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: ANAT I 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:

**Nathalie Angibeau**

Name of Person

**ANATI LLC**

Firm/Company

**117-19 238th Street**

Address

**Elmont, NY 11003**

City/State and Zip Code

**anatllc@hotmail.com**

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

For further information concerning this matter, please call:

**Nathalie Angibeau**

Name of Contact Person

**646**

at ( )

Area Code

**206-6161**

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

☐ \$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 TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ANAT I 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 Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. New York 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 117-19 238 th Street Elmont, NY 11003  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. September 2014  
117- 19 238th Street  
(Street Address of Principal Office)

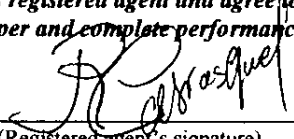
6. Elmont, NY 11003  
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Rolando A. Carrasquel  
Office Address: 808 West. Kaley Street  
Orlando, FL, Florida 32805  
(City) (Zip code)

**Registered agent's acceptance:**

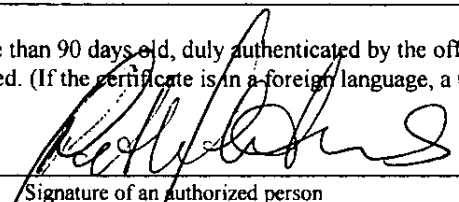
*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Registered agent's signature)

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

Nathalie Angibeau-Tamas President  
117-19 238th Street Elmont, NY 11003

9. Attached is a 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. (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

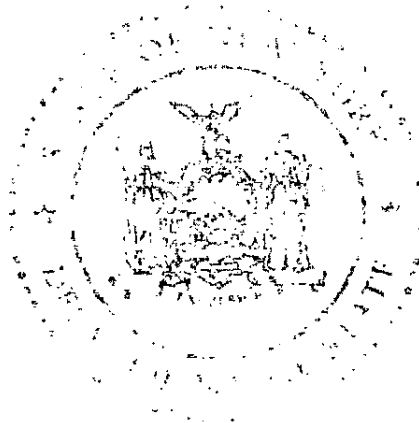
(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Nathalie Angibeau-Tamas  
(Typed or printed name of signer)

FILED  
5 MAY 26 PM 12:28  
DEPT. OF STATE  
TALLAHASSEE, FLORIDA

State of New York  
Department of State } ss:

I hereby certify, that ANAT I, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/01/2011, and that the Limited Liability Company is existing so far as shown by the records of the Department.



FILED  
15 MAY 26 PM 12:28  
ALBANY, NEW YORK

\*\*\*

WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 11th day of December two  
thousand and fourteen.

*Anthony Giardina*

Executive Deputy Secretary of State