# M50005/34

(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:	

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JUL 01 2015 S. YOUNG

## ATTORNEYS CORPORATION SERVICE, INC. 5668 EAST 61<sup>ST</sup> STREET COMMERCE, CA 90040

TEL: (800) 462-5487 ext.113 FAX: (800) 388-0330 EMAIL: nikki@attorneyscorpservice.com

#### DOCUMENT FILING REQUEST LETTER

#### **REGULAR FILING SERVICE**

DATE:

Wednesday, June 17, 2015

FROM:

NIKKI ARUTYUNYAN

Client Matter: # 5621467

TO:

DEPARTMENT OF STATE

**DIVISION OF CORPORATIONS** 

CLIFTON BUILDING

2661 EXECUTIVE CENTER CIRCLE

TALLAHASSEE, FL 32301

ATTN:

DOCUMENT FILING DIVISION

RE:

## IFCO HOMELAND, LLC

Enclosed is one of the following:

(X) Articles of Organization

Return request with filing:

(1) FILED ARTICLES

Return request via following:

(X) Priority Mail/Email

Total Page(s) attached including transmittal page: (5)

\*\*Fax/Email a copy of the filed documents upon acceptance of filing\*\*

\*\*PLEASE RETURN FILED DOCUMENTS ATTACHED WITH AN INVOICE TO: ATTORNEYS CORPORATION SERVICE, INC. 5668 EAST 61<sup>ST</sup> STREET, COMMERCE, CA 90040\*\*

\*\*PLEASE CONFIRM UPON RECEIVED DOCUMENTS\*\*

NOTE(S):

CHECK #790991 \$125.00 (Filing fee)

### **COVER LETTER**

Registration Section

TO:

Division of Corporation	ons			
ICFO Homeland, I	LLC			
	Name of	Limited Liability	Company	
The enclosed "Application by Fo Existence, and check are submitt	oreign Limited Liability Com ed to register the above refer	pany for Authoriz enced foreign lim	ation to Transact Businited liability company to	ess in Florida," Certificate of o transact business in Florida
Please return all correspondence	concerning this matter to the	following:		
NIKKI ARUT	YUNYAN			
	. N	lame of Person		
ATTORNEYS	S CORPORATION SERVIC	E INC.		
	F	irm/Company		
5668 E 61ST S	ST			5 July 71
		Address		35 = - B
COMMERCE	, CA 90040			19 PM
<del></del>	City/S	State and Zip Code	<u> </u>	85 <b>5</b>
NIKKI@ATTO	RNEYSCORPSERVICE.CO	)M		<b>製品 3</b>
<u> </u>	E-mail address: (to be use	d for future annua	l report notification)	
For further information concerning	ng this matter, please call:			
NIKKI ARUTYUNYA	N	800 at (	462-5487 X113	
Name	of Contact Person	Area Code	Daytime Teleph	one Number
MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314			STREET ADDRESS Division of Corporation Registration Section Clifton Building 2661 Executive Center Tallahassee, FL 3230	ons er Circle
Enclosed is a check for the follow ■ \$125.00 Filing Fee	ving amount:  ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Fili Certified Copy		Filing Fee, Certificate Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 6050902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

IFCO Homeland, LLC	4 <i>:</i>
(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 nan Liability Company," "L.L.C," or "LLC,")	ne must include "Limited
<sub>2.</sub> California <sub>3.</sub> 47-4163054	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicab company is organized)	le)
4. Has not transacted business in Florida yet.	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	59 <b>5</b>
5. 1020 Prospect Street, Suite 425	
La Jolla, CA 92037	
(Street Address of Principal Office)	新C 9 円
6. 1020 Prospect Street, Suite 425	
La Jolla, CA 92037	
(Mailing Address)	≥., o
7. The name, title or capacity and address of the person(s) who has/have authority to man	nage is/are:
CIRE Management, LLC, Its Manager	
Joshua Volen, Trevor Smith, Co-Managing Members	
1020 Prospect Street, Suite 425, La Jolla, CA 92037	
8. Attached is an original certificate of existence, no more than 90 days old, duly authentic having custody of records in the jurisdiction under the law of which it is organized. (A ph acceptable. If the certificate is in a foreign language, a translation of the certificate under comust be submitted)	otocopy is not
$\mathcal{C}$	-
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 the ann aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided	not the facts stated herein are true. I for in s.817.155, F.S.)
Jason N. Tamashiro	

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.

I. The name of the Limited Liability Company is:  IFCO Homeland, 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:	1
三	<u>:</u>
5237 SUMMERLIN COMMONS, STE 400	ر
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
FORT MYERS FL 33907 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)

## State of California

## Secretary of State

#### **CERTIFICATE OF STATUS**

ENTITY NAME: IFCO HOMELAND, LLC

FILE NUMBER:

JURISDICTION:

201515210136

**FORMATION DATE:** 

05/29/2015

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

**CALIFORNIA** 

STATUS:

**ACTIVE (GOOD STANDING)** 

1, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.

SEAL OF THE STATE OF THE STATE

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of June 9, 2015.

ALEX PADILLA Secretary of State