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(Re	equestor's Name)	
(Ad	Idress)	
(Ac	ldress)	,
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	Isiness Entity Nar	ne)
(Do	ocument Number)	-
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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JUL 0 7 2015 **J SHIVERS**

COVER LETTER

	tion Section of Corporatio	ns s	w o o o o o o o o o o o o o o o o o o o	
. SUBJECT:	CAN	M CAPITA	il, ilc	
		Name of	Limited Liability Company	
				ansact Business in Florida," Certificate of y company to transact business in Florida
Please return all co	orrespondence	concerning this matter to the	following:	
		UCHENDU	AZOSO ame of Person	
		N	ame of Person	
		CANDU C	CAPITAL , irm/Company	LLC
		F	irm/Company	
	6615	Boyutow.	BCH BLVD	, 353
			Address	
	1304	INTON BE	ACH / FL tate and Zip Code	33437
		City/S	tate and Zip Code	
	A70	sou@ outre	ook. Com	
			d for future annual report not	ification)
For further inform	ation concernit	ng this matter, please call:		
uch		AZODO		32 - 7777
	Name	of Contact Person	Area Code Day	rtime Telephone Number
MAILIN	IG ADDRESS	<u>E</u>		ADDRESS:
	of Corporation ion Section	S		of Corporations ion Section
P.O. Box			Clifton B	uilding
Tallahass	see, FL 32314			ceutive Center Circle see, FL 32301
Enclosed is a chec	k for the follow	ving amount:		
□ \$125.0	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

	TION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY INNESS IN THE STATE OF FLORIDA:
CAI	ign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(Name of Fore	ign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
Liability Company," "L.L.C,"	
2. DELA	of which foreign limited liability 3. (FEI number, if applicable)
(Jurisdiction under the law company is organized)	of which foreign limited liability (FEI number, if applicable)
4.	NIA
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 661	5 BOYNTON BCH BLUD 35-3
304	STOUNTON BCH BLUD 353 NTON BEACH, FL 33437 (Street Address of Principal Office)
,	(Street Address of Principal Office)
б	
	(Mailing Address)
7. Name and street address	s of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)
Name:	UCHENDY AZODO
Office Address:	GGIS BYMNIAN BEACH BCWD BOYNTON BEACH (City) (City) Report A & ODO (City) A & ODO (City) A & ODO (City) (City) (City) (City) (City) (City)
	BOYNTON BEACH, Florida 33437
Registered agent's accept	
Having been named as repthis application, I hereby	gistered agent and to accept service of process for the above stated corporation at the place designated in accept the appointment as registered agent and agree to act in this capacity. I further agree to comply statutes relative to the proper and complete performance of my duties, and I am familiar with and accept tion as registered agent.
	(Registered agent's signature)
8. The name, title or capa	city and address of the person(s) who has/have authority to manage is/are:
UCHENDI	1 A200 RA 5
MENERG	ier de la company de la compan
6615 309	NER BCH BLVD 353 / BOYNTON BCH, EL 33437
9. Attached is a certificate	of existence, no more than 90 days old, duly authenticated by the official having custody of records in the of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath ibmitted)
	Signature of an authorized person
	in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
	Typed or printed name of signee
	Aber or brunes or p.D.

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CANDU CAPITAL 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 THIRTIETH DAY OF JUNE, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CANDU CAPITAL LLC" WAS FORMED ON THE THIRD DAY OF JULY, A.D. 2013.

15 JUL -6 PM 3: 55
SECRETARY OF STATE
TALLAHASSEE FLORIDA

5361614 8300

150989955

11

Jeffrey W. Bullock, Secretary of State

AUTHENTY CATION: 2513929

DATE: 06-30-15

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