

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000228841 3)))



H150002268413ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850) 205-8842 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company Clemont Concepts, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

SEP 24 2015

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

t	epts, LLC		
(Name of Fo	relga Limited Liability Company; must i	include "Limited Liability Company," "L.L.C.," or "Li	Z:"}
(If name unavailable, enter a		of transacting business in Florida. The alternate name n	oust factoric "Limited
DELAWARE	, w a.c. j		
(Jurisdiction under the lav	of which foreign limited liability	J. (FSI number, if applicable)	
company is organized)	0///		
4	(Date first transpoted business	in Florida, if prior to registration.) 03, F.S. to determine penalty liability)	
755 AD 470M AVD		03, F.S. to determine penalty liability)	
5. 235 ARAGON AVER	YUB, 2ND FLOUR		
CORAL GABLES, PI	LORIDA 33134		
845 17 1000 1000	(Street Address of Prin	nelpal Office)	
6. 255 ARAGON AVEN	UB, 2ND PLOOR		•
CORAL GABLES, FI	ORIDA 33134		
,	(Mailing Add	dross)	
7. Name and street addre	sa of Florida registered agent; (P.O.	Box NOT acceptable)	
Neme:	ALEJANDRO E. JORDAN, ESQ.).	
	255 ARAGON AVENUE, 2ND FI	LOOR	
Office Address:	CORAL GABLES		100 B
	(City)	Plorida 33134 (Zip code)	
Registered agent's accep	fance:	4 — 4 ,	五色 留
lesignated in this opplica	tion, I hereby accept the appointmen	of process for the above stated finited liability on it as registered agent and agree to act in this ca	pacity. I forther age
o complywith the provisi	ans of all statutes relative to the pro-	per and complete performance of my duties, an	d I am familiar with
ocent the obligations of	the bromment and to the state of the	•	
ecept the obligations of i			ر الربا يسبي
accept the obligations of t	(Registered	and the little	المستريخ
iccept the obligations of t		agent s signature)	
iccept the obligations of i	city and address of the purson(s) wh	nave authority to manage is/are:	
accept the obligations of i The name, title or cape KEITH MARKES, AS PR	city and address of the person(s) wh RESIDENT OF BASIC WAINTENA		7,09
to obligations of it. The name, title or cape KEITH MARKES, AS PR	celty and address of the person(s) who RESIDENT OF BASIS WAINTENA ERMONT CONCEPTS, LLC	NCE, INC., AS THE SOLE EQUITY MEMBER	7,09
to obligations of it. The name, title or cape KEITH MARKES, AS PR	city and address of the person(s) wh RESIDENT OF BASIC WAINTENA	NCE, INC., AS THE SOLE EQUITY MEMBER	7,09
t. The name, title or cape KEITH MARKES, AS PR AND MANAGER OF CL 325 Empire Boule Attached is a certificate unisdiction under the law of	celty and address of the pursun(s) who DESIDENT OF BASIC WAINTENA ERMONT CONCEPTS, LLC EVAR d, Brooklyn Ny 1122 of axistonoc, no more than 90 days of of which it is organized. (If the postifi	NCE, INC., AS THE SOLE EQUITY MEMBER	R
t. The name, title or cape KEITH MARKES, AS PR AND MANAGER OF CL 325 Empire Boule Attached is a certificate unisdiction under the law of	celty and address of the pursun(s) who DESIDENT OF BASIC WAINTENA ERMONT CONCEPTS, LLC EVAR d, Brooklyn Ny 1122 of axistonoc, no more than 90 days of of which it is organized. (If the postifi	ANCE, INC., AS THE SOLE EQUITY MEMBER 25 and, duly authenticated by the official having costs	edy of records in the
t. The name, title or cape KEITH MARKES, AS PR AND MANAGER OF CL 325 Empire Boule Attached is a certificate	celty and address of the parson(s) who DESIDENT OF BASIC WAINTENA ERMONT CONCEPTS, LLC EVAR d, Brook lyn Ny 1122 of axistonoc, no more than 90 days of of which it is organized. (If the certification)	ANCE, INC., AS THE SOLE EQUITY MEMBER 25 bid, duly authenticated by the official having custo licate is in a foreign language, a translation of the	edy of records in the
i. The name, title or cape KEITH MARKES, AS PR AND MANAGER OF CL 325 Empire Boule Attached is a certificate unadiction under the law of the translator must be su	celty and address of the person(s) who DESIDENT OF BASIC STAINTENA ERMONT CONCEPTS, LLC EVAR d, Brook Tyn Ny 1122 of existence, no more than 90 days of of which it is organized. (If the ceptification)	ANCE, INC., AS THE SOLE EQUITY MEMBER 25 Old, duly authenticated by the official having custo Bears is in a foreign language, a translation of the	edy of records in the cordificate under oath
t. The name, title or cape KEITH MARKES, AS PRAND MANAGER OF CL 325 Empire Boule. Attached is a certificate unadiction under the law of the translator must be such that document is executed abmitted in a document to	celty and address of the person(s) who RESIDENT OF BASIC MAINTENA ERMONT CONCEPTS, LLC evard, Brooklyn Ny 1122 of existence, no more than 90 days of which it is organized. (If the certification) Signature of secondance with section 605,0203	ANCE, INC., AS THE SOLE EQUITY MEMBER 25 bid, duly authenticated by the official having custo licate is in a foreign language, a translation of the	e information

<u>Delaware</u>

Page 1

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

DELAWARE, DO HEREBY CERTIFY "CLERMONT CONCEPTS, 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 TWENTY-SECOND DAY OF SEPTEMBER, A.D. 2015.

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



5829840 8300 5R# 20150222975

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

Marrie W. Edward School of the State of the

Authentication: 10110653

Date: 09-22-15