

M1500007678

(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:

Office Use Only



600277344946

09/24/15--01010--016 **160.00

FILED
TO SEP 24 11 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 25 2015
S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ANS Financial Services 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:

Ayaz K. Siraj

Name of Person

ANS Financial Services LLC

Firm/Company

2224 Central Ave

Address

Vienna, VA 22182

City/State and Zip Code

ayaz.siraj@gmail.com

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

For further information concerning this matter, please call:

AYAZ SIRAJ

Name of Contact Person

at (703) 627-3893

Area Code

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

FILED
SEP 24 PM 5:06
TALLAHASSEE, FLORIDA

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

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ANS Financial Services LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")
Florida ANS LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")
2. State of Virginia 3. 47-2558942
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. July 30, 2015
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 2224 Central Ave, Vienna, VA 22182
(Street Address of Principal Office)
6. 2224 Central Ave, Vienna, VA 22182
(Mailing Address)

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

Name: Ayaz K. Siraj
Office Address: 233 SW Whitmore Dr.
Port St. Lucie, Florida 34984
(City) (Zip code)

Registered agent's acceptance:

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 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.

Ayaz Siraj

(Registered agent's signature)

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

Qamar Wahaj, Director of Property Management

233 SW Whitmore Dr.

Port St. Lucie, Florida 34984

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)

Ayaz Siraj

Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

AYAZ SIRAJ

Typed or printed name of signer

FILED
SEP 24 PM 5:06
TALLAHASSEE, FLORIDA
DEPT. OF STATE

Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF FACT

I Certify the Following from the Records of the Commission:

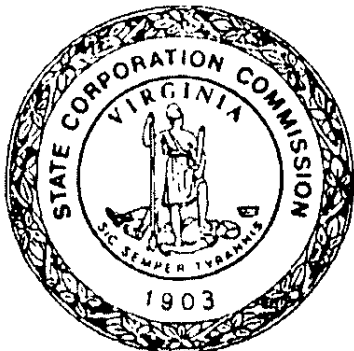
That ANS Financial Services LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the date of its organization is December 13, 2014; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.

FILED
SEP 24 PM 5:06
STATE
TREASURER, FLORIDA



*Signed and Sealed at Richmond on this Date:
September 17, 2015*

Joel H. Peck

Joel H. Peck, Clerk of the Commission