## M15000009195

(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



900279086659

11/13/15--01003--013 \*\*160.00

2015 NOV 13 AN IO: 2 DECRETARY OF STATE ALL AHASSEE, FLORII

2015 NGV 13 AM 9:35

N. Cumgan NOV 1 6 2015

FLORIDA RESEARCH & FILING SERVICES, INC. 1211 CIRCLE DRIVE TALLAHASSEE, FL 32301 PHONE (850)364-8000

OFFICE USE ONLY

WALK-IN

**ENTITY NAME:** 

AVE RET CONDO, LLC

CK# 7068 FOR \$160.00

PLEASE FILE THE ATTACHED QUALIFICATION & RETURN THE FOLLOWING:

XXX CERTIFIED COPY

\_\_\_ STAMPED COPY

XXX CERTIFICATE OF STATUS

Examiner's Initials

#### **COVER LETTER**

ŢO:		tion Section of Corporation	s	•			
SUBJ		ERET Condo, L	rc				
00220			Name of I	Limited Liability C	ompany		
						sact Business in Florida," Certificate of company to transact business in Florida	
Please	return all co	orrespondence c	oncerning this matter to the	following:			
		Chad Hagle					
	Name of Person						
		AVE RET Condo, LLC					
	Firm/Company						
		10 Harris Court, Suite B-1					
	Address						
		Monterey, CA 93940					
	City/State and Zip Code						
	chagle@aventinedevco.com						
		E-mail address: (to be used for future annual report notification)					
For fu	rther inform	ation concerning	this matter, please call:				
	Chad Hagle			949 at (	838-566	5	
		Name o	Contact Person	Area Code	Dayt	ime 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:  \$\Boxed{125.00}\$ \text{ Filing Fee} \tag{5130.00}\$ \text{ Filing Fee & Certificate of Status}			☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certific Certified Copy of Status & Certified Copy		■ \$160.00 Filing Fee, Certificate of Status & Certified Copy		



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 16, 2015

FLORIDA RESEARCH & FILING SERVICES, INC.

SUBJECT: AVE RET CONDO, LLC

Ref. Number: W15000074875

We have received your document for AVE RET CONDO, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

RE-SUBMITIONS PETAIN ENDING PORTE INDISTRIBUTIONS
RE-SUBMITIONS
SUBMISSION
SUBMISSION
SUBMISSION If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 215A00024105

www.sunbiz.org

### 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: AVE RET Condo, 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.") Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 10 Harris Court, Suite B-1 Monterey, CA 93940 (Street Address of Principal Office) (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) NRAI Services, Inc. Name: 1200 South Pine Island Road Office Address: Plantation Florida (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 complywith 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: Chad Hagle -MEMBER 1024 Bayside Drive, Suite 202 Newport Beach, CA 92660 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 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. Chad Hagle

Typed or printed name of signee

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "AVE RET CONDO, 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 TWELFTH DAY OF NOVEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AVE RET CONDO, LLC" WAS FORMED ON THE SECOND DAY OF NOVEMBER, A.D. 2015.

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

5866552 8300 SR# 20150889984 Authentication: 10409426

Date: 11-12-15

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