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J. HARRIS

COVER LETTER

Divis	sion of Corporation	s i		
SUBJECT:	Two Brothers Fillmo	ore Group, LLC		
		Name of	Limited Liability Company	
				ansact Business in Florida," Certificate o y company to transact business in Florid
Please return	all correspondence c	oncerning this matter to the	following:	
	Jonathan Gopm	an ³		
		N.	ame of Person	<u></u>
	Akerman LLP			
		Fi	rm/Company	
	9128 Strada Pla	ce, Suite 10205		
			Address	
	Naples, Florida	34108		
		City/S	tate and Zip Code	
	jonathan.gopman	-		
		E-mail address: (to be used	d for future annual report no	tification)
For further in	formation concerning	g this matter, please call:		
Jona	athan Gopman		239 449-56 at ()	500
******	Name o	f Contact Person	Area Code Day	ytime Telephone Number
Divi Regi P.O.	ILING ADDRESS: sion of Corporations stration Section Box 6327 shassee, FL 32314	;	Division Registra Clifton E 2661 Exc	FADDRESS: of Corporations dion Section Building ecutive Center Circle see, FL 32301
	check for the follow 125.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	S155.00 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

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:

, Two Brothers Fillmore			
1.	ign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L	LC.")	
		·	*
Liability Company," "L.L.C,"	ternate name adopted for the purpose of transacting business in Florida. The alternate name is or "LLC.")	must include "Limi	ited
2. Nevada	3. Applied for		
(Jurisdiction under the law company is organized)	of which foreign limited liability (FEI number, if applicable)	-	
4. December 4	, 2015		
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		
5. 1002 East Newport Cer	nter Drive, Suite 200		
Deerfield Beach, Florid		Pe	C
6 1002 East Newport Cen	(Street Address of Principal Office)	im c	
·		in e	DEC
Deerfield Beach, Florid		か.乱 公立	5
	(Mailing Address)	mg.	Ē
 Name and <u>street address</u> 	s of Florida registered agent: (P.O. Box NOT acceptable)	E CA	
Name:	NRAI Services, Inc.	至至	
Office Address:	1200 South Pine Island Road	35	9
	Plantation , Florida 33324		
designated in this applicat	(City) (Zíp code) tance: glstered agent and to accept service of process for the above stated limited liability ion, I hereby accept the appointment as registered agent and agree to act in this c	apacity. I furthe	er agree
to complywith the provision accept the obligations of n	ons of all statutes relative to the proper and complete performance of my duties, a ny position as registered agent.	nd I am familiar	with an
	By: NRAI Services, Inc.		
•	(Registered agent's signature) Regi		
8 The name title or cana	city and address of the person(s) who has/have authority to manage is/are:		
-	East Newport Center Drive, Deerfield Beach, Florida 33442		
	East Newport Center Drive, Deerfield Beach, Florida 33442		
	22 East Newport Center Drive, Deerfield Beach, Florida 33442		
Attion Collett, MORGATOR	2 East Newport Center Drive, Decried Beach, Fronta 33442		
 Attached is a certificate of jurisdiction under the law cof the translator must be su 	of existence, no more than 90 days old, duly authenticated by the official having cus of which it is organized. (If the certificate is in a foreign language, a translation of the bmitted)	tody of records i e certificate unde	n the er oath
	Signature of an authorized person		
This document is executed submitted in a document to	in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any fa the Department of State constitutes a third degree felony as provided for in s.817.15	lse information 5, F.S.	
	Seth Cohen		
	Typed or printed name of signee		

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, TWO BROTHERS FILLMORE GROUP, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since November 25, 2015, and is in good standing in this state.



Certified By: Nita Hibshman Certificate Number: C20151202-0122 You may verify this certificate online at http://www.nvsos.gov/ IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on December 2, 2015.

BARBARA K. CEGAVSKE Secretary of State