5612968430

https://efile.sumbiz.org/scripts/efilcovr.exe



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.

(((H15000301778 3)))



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 : CORPORATE CREATIONS INTERNATION

Account Number: 110432003053 Phone : (561)694-8107 : (561)694-1639 Fax Number

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

Email Address:

Foreign Limited Liability Company CFL IV LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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:

(Name of I	Foreign Limited Liability Company; mu	ust include "Limited Liability Company," "LLC,"	or "LLC.")
copy of the wr	available, enter alternate name adopted itten consent of the managers or manage Limited Liability Company," "LLC," o	for the purpose of transacting business in Florida ing member adopting the alternate name. The alter r "LLC.")	and attach a ernete name
elaware		3	
Jurisdiction un mited liability	nder the law of which foreign y company is organized)	(FEI Number if applica	ible)
lovember 24		5, perpetual	
(Date	of Organization)	(Duration: Year Limited Liabi will cease to exist or "perpetua	
upon filing	of this application		
		ousiness in Florida, if prior to registration.)	2015 TALL
			- 조재 원 -
Aventura, F	~		<u> </u>
	(1°r,	incipal Office Address)	L.L
18305 Bisca	ayne Blvd., Suite 402		≒ ₩ >
Aventura, F	L 33160		STATE OF OT
		(Mailing Address)	즐거 은
f limited lis	ability company is manager-mans	aged company, click here	7 % -
he name, ti	itle or capacity and address of the	person(s) who has/have authority to mai	nage is/are:
Jordan Kav	ana, Manager 18305 Biscayne Blvd	, Suite 402 Aventura, FL 33160	
			
naving custo occeptable.	ody of records in the jurisdiction	te, no more than 90 days old, duly authent under the law of which it is organized (a unglished, a translation of the certificate un	photocopy is not
	(in accordance with section 605.0	authorized representative of a member, 203(3), F.S., the execution of this document cons of perjury that the facts stated herein are true)	titutes
	Jordan Kayana	by Tim Pratts as Attorney-in-Fa	_£

Typed or printed name of signce

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the	he Limited Liability Company is:	
If unavailable, the	e alternate to be used in the state of Florida is:	-
2. The name and t	the Florida street address of the registered agent and office are:	_
	Corporate Creations Network Inc.	
-	(Name)	
	11380 Prosperity Farms Road #221E	7915 DEC
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	E T
_	Palm Beach Gardens FL 33410	C 22
	City/State/Zip MC	
liability company of registered agent ar statutes relating to	ed as registered agent and to accept service of process for the above stated lighted at the place designated in this certificate. I hereby accept the appointment of indicate the appointment of and agree to act in this capacity. I further agree to comply with the provisions of a the proper and complete performance of my duties, and I am familiar with and tions of my position as registered agent as provided for in Chapter 605, Florida	, o.
	EIIIII	
	Corporate Creations Network Inc. // Tim Pratts, Special Secr	etary
	(Signature)	
	\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)	

5888132 8300

SR# 20151493134

elaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELANARE, DO HEREBY CERTIFY "CFL IV 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 DECEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CFL IV LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF NOVEMBER, A.D. 2015.

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

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

Authentication: 10670253

Date: 12-22-15