

(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: WIV-1801 CEC-1.
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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 12, 2016

MARK J. CHMIELARSKI, ESQ. 201 E. PINE STREET, SUITE 500 ORLANDO, FL 32801

SUBJECT: CC HIBISCUS, LLC Ref. Number: W16000001821

We have received your document for CC HIBISCUS, LLC and your check(s) totaling \$130.00. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Need Certificate of Existence from Utah showing entity in Good Standing.,

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

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason Regulatory Specialist II

Letter Number: 716A00000762

COVER LETTER

TO:

Registration Section Division of Corporations

		Name of	Limited Liability (Company		
enclosed " ence, and	Application by For check are submitte	eign Limited Liability Comp d to register the above refer	pany for Authoriza enced foreign limi	tion to Tra	nnsact Business in Florida," C y company to transact busine	Certificate ss in Flori
se return al	II correspondence	oncerning this matter to the	following:			
	Mark J. Chmie	arski, Esq.				
		N	ame of Person			
	Greenspoon M	arder, P.A.				
		F	irm/Company			
	201 E. Pine Str	eet, Suite 500				
			Address			
	Orlando, FL 32	801				
	-	City/S	tate and Zip Code			
	mark.chimelarsk	i@gmlaw.com				
		E-mail address: (to be use	d for future annual	report not	ification)	
urther info	ormation concernin	g this matter, please call:				
Mark	J. Chmielarski, Es	q.	407 at (425-65	59	
	Name o	f Contact Person	Area Code	Day	rtime Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section			STREET ADDRESS: Division of Corporations Registration Section			
P.O. E	3ox 6327 nassee, FL 32314			Clifton B 2661 Exe		
	heck for the follow 25.00 Filing Fee	ing amount: \$\Boxed{\text{m}}\$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ıg Fee &	□ \$160.00 Filing Fee, Cer 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:

Utah	or "LLC.")	for the purpose of transacting b	business in Florida.	The alternate nar	ne must	include "Limited
	ŕ	₃ 47-567				
(Jurisdiction under the law of company is organized)	f which foreign limi	ted liability	(FEI num	per, if applicable)	
•	(Date first tra	ansacted business in Florida, if p 05.0904 & 605.0905, F.S. to de	prior to registration. termine penalty liab) ility)	_	
131 Soundview Lane					·	
New Canaan, CT 06840					_	
	(Stre	eet Address of Principal Office)			2016	
Same as above			<u></u>		-5=	1 1
						Committee in the Commit
	<u> </u>	(Mailing Address)				ī
Name and street address	of Florida register	red agent: (P.O. Box NOT	acceptable)	· co	U	
Name:	Mark J. Chmielar	ski, Esq.		ORID	<u>ល</u>	
Office Address:	201 E. Pine Street	, Suite 500		>		
	Orlando		Florida	32801		
egistered agent's accepta		(City)		(Zip code)		
signated in this application	on, I hereby accep is of all statutes re		ered agent and ag mplete performan	ree to act in th ice of my dutie	is capa	city. I further a
	77	(Registered agent's sign	nature)		_	
. The name, title or capaci		the person(s) who has/have	authority to mana	ge is/are:		
	mar					
ode Capital Partners, LLC	4.1					

Jared Remington, as Manager of Code Capital Partners, LLC, as manager of Cot Hilasous, LLC
Typed or printed name of signee



Utah Department of Commerce

Division of Corporations & Commercial Code

160 East 300 South, 2nd Floor, PO Box 146705 Salt Lake City, UT 84114-6705 Service Center: (801) 530-4849 Toll Free: (877) 526-3994 Utah Residents Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov

01/12/2016 9611322-016001122016-2262401

CERTIFICATE OF EXISTENCE

Registration Number:

Business Name:

Registered Date:

Entity Type: Current Status: 9611322-0160

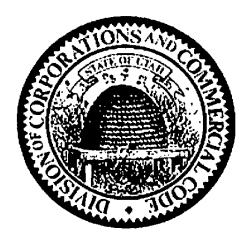
CC HIBISCUS, LLC

November 25, 2015

LLC - Domestic

Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



Hathy Berg-

Kathy Berg Director

Division of Corporations and Commercial Code