716000003008

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAI	Ļ					
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



100281461801

02/04/16--01009--018 **130.00

6 APR-8 PM 12: 1

APR 1 2 2016 Y SULKER

UN6 0211



February 5, 2016

JEAN WODNICKI 9133 FROUDE AVE SURFSIDE, FL 33154

SUBJECT: ROYAL PALM, LLC Ref. Number: W16000009311

We have received your document for ROYAL PALM, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

ALTERNATE NAME MUST BE ON SECOND LINE, ORIGINAL NAME MUST BE ON FIRST.

The document is illegible and not acceptable for imaging.

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.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 816A00002578

COVER LETTER

	egistration Section ivision of Corporatio	ons					
SUBJECT	: K	OYAL P	ALM OF ne of Limited Liability	FC9 Company	ORIDA, LLC		
The enclose Existence,	ed "Application by Fo and check are submitt	oreign Limited Liability ed to register the above	Company for Authoriz referenced foreign lim	ation to Tra	ansact Business in Florida," Certificate of y company to transact business in Florida.		
Please retu	rn all correspondence	concerning this matter	to the following:				
	·	JOON	Name of Person	, M	n h sec		
	R	ed Jakon	Firm/Company	Fu	JRIDA LLC		
	9133 FRONDE AVE						
	City/State and Zip Code						
	Tanuobn(cki @ smaju · com E-mail address: (to be used for future annual report notification)						
For further	information concerni	ng this matter, please ca	ıll:				
_	Jean Name	of Contact Person	at (305 Area Code) <u>29.</u> Day	R-9050 rtime Telephone Number		
Di Re P.	AILING ADDRESS vision of Corporation egistration Section O. Box 6327 Illahassee, FL 32314	<u>:</u> s		Division Registrati Clifton B 2661 Exe	of Corporations ion Section duilding ecutive Center Circle see, FL 32301		
Enclosed is	a check for the follow \$125.00 Filing Fee	wing amount: \$130.00 Filing Fed Certificate of Status	e & 🔲 \$155.00 Fili Certified Copy	_	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy		

14 4 T 17

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: ROYAL PALM LCC
(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.") 3. 46-551.7964
(FPI 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) GREEN VYURY PARKWAY SURFSIDE FL 33/54 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: 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. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: 1824 WANKER WANATER 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) 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. 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, ROYAL PALM, 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 March 3, 2014, and is in good standing in this state.

AND VADA

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on January 29, 2016.

BARBARA K. CEGAVSKE
Secretary of State

Electronic Certificate
Certificate Number: C20160129-1623
You may verify this electronic certificate
online at http://www.nvsos.gov/