11/600003392

(Re	equestor's Name)				
(Address)					
(Ac	ldress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
Signy righ WIL	6-20424	<i>o</i>			
7	Office Use On	ly			



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K.S.ALY EXAMINER APR 26



March 18, 2016

HUMBERTO L. RODRIGUEZ GONZALEZ & RODRIGUEZ PL 999 PONCE DE LEON BLVD, STE. 1135 CORAL GABLES, FL 33134

SUBJECT: 421 COLLINS BUILDING LLC

Ref. Number: W16000020426

We have received your document for 421 COLLINS BUILDING LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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).

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

COVER LETTER

то:		ation Section of Corporation	ıs				
SUBJE		Collins Building	g LLC				
БОВОВ	···		Name of I	Limited Liability	Company	· · · · · · · ·	
						unsact Business in Florida," Certific company to transact business in F	
Please re	eturn all o	correspondence c	oncerning this matter to the	following:			
		Humberto L. Re	odriguez				
			Na	ame of Person			
		Gonzalez & Rodriguez PL					
	Firm/Company						
		999 Ponce de Leon Blvd. Stc. 1135					
	Address						
		Coral Gables FL 33134					
	City/State and Zip Code						
	hrodriguez@gr-law.net						
	_		E-mail address: (to be used	for future annual	report not	ification)	
For furth	er inforn	nation concerning	g this matter, please call:				
	Humber	to L Rodriguez		305 at (461-488	80	
		Name of	Contact Person	Area Code	Day	time Telephone Number	
	Division Registrat P.O. Box	of Corporations ion Section 6327 see, FL 32314			Division of Registrati Clifton Bo 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
Enclosed	l is a chec ■ \$125.	ck for the followi 00 Filing Fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	ıg Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	ē

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0802, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. 421 Collins Building L		
(Name of Fore	ign Limited Liability Company; must include "Limited Liability Co	ompany," "L.L.C.," or "LLC.")
(If name unavailable, enter al Liability Company," "L.L.C.	ternate name adopted for the purpose of transacting business in Flo	rida. The alternate name must include "Limited
2. Delaware	3,	
(Jurisdiction under the law company is organized)	of which foreign limited liability (FEI	number, if applicable)
3-2-16		
4. 3-2-10	(Date first transacted business in Florida, if prior to registre	ution.)
5 999 Ponce de Leon Bly	(See sections 605.0904 & 605.0905, F.S. to determine penalty	y liability)
5. 333 I GREE de Leon Bro	W. PH 1155	Annual Control of the
Coral Gables, FL 3313	4	•
	(Street Address of Principal Office)	
6. 999 Ponce de Leon Blv	d. PH 1135	2016 APR
Coral Gables, FL 3313	1	
	(Mailing Address)	
7. Name and street addres	of Florida registered agent: (P.O. Box NOT acceptable)	ETO P
	Gonzalez & Rodriguez PL	
Name:		G.F.
Office Address:	999 Ponce de Leon Rivd. PH 1135	電料 7
	Coral Gables , Flor	da 33134
	(City)	(Zip code)
Registered agent's accept	ance: elstered agent and to accept service of process for the aboye	stated limited liability company at the place
designated in this applicat	ion, I hereby accept the appointment as registered agent in	A agree to act in this capacity. I further agree
	ns of all statutes relative to the proper and complete perfor ny position as registered agent.	mance of my duties, and I am familiar with and
accept the obligations by h	ty position as registered agent.)
	(Registered agent's signification)	
	city and address of the person(s) who has/have authority to m	anage is/are:
Horacio P. Rodriguez	managu	
999 110	na de Deon Bl Vd !	Ph 1135
Poral (June FL 33/34	
0		7
9. Attached is a certificate invised at the law of	of existence, no more than 90 days old, duly authenticated by f which it is organized. (If the certificate is in a foreign langu	the official having custody of records in the
of the translator must be su		lage, a fransiation of the certificate under oath
	Signature of an authorized person	
This document is avanuable	in accordance with section 605,9293 (1) 46), Florid Statutes	I am aware that any false information
	the Department of State considers a third degree felony as p	
	Humberto L. Rodriguez	
,	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 "421 COLLINS BUILDING 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 FEBRUARY, A.D. 2016.





Authentication: 201865079

Date: 02-22-16