MIWW04139

(Re	questor's Name)	
(Ne	Macarol a Marrie)	
	ldress)	
(A0	idless)	
(Ad	idress)	
	(0) (77' (0)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





500285684475

05/23/16--01030--020 **125.00

MIR BY 24 A II: 39

MAY 25 2016 O.BRUCE

COVER LETTER

SUBJECT: Day Clips Name of Limited Liability Company
Name of Limited Liability Company The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and clicek are submitted to register the above referenced foreign limited liability company to transact business in Florida. Please return all correspondence: concerning this matter to the following: Magaly & Lio Name of Person 23/2 W LLC Firm/Company 59/2 W 26 AVE Address Hi A LEAH F/ 330/6 City/State and Zip Code Miriam Delrio 5 Dangil com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Magaly Delrio 5 10 607-68/7
Existence, and effects are submitted to register the above referenced foreign limited liability company to transact business in Florida. Please return all correspondence concerning this matter to the following: Magaly & Lio Name of Person 23/2 W LLC Firm/Company 59/2 W 26 Ave Address Hi ALEAH F/ 330/6 City/State and Zip Code MiRiam DEL Rio 5 29 mail . com. E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Magaly Da Rio at 305 607-68/7
Magaly on Lio Name of Person 23/2 W LLC Firm/Company 59/2 W 26 Ave Address Hialfah F/ 330/6 City/State and Zip Code Miriam DEL Rio 5 agmail.com. E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Magaly on Rio at 305, 607-68/47
Firm/Company 5912 W 26 AVE Address Hi ALEAH F/ 33016 City/State and Zip Code MiRiam DEL Rio 5 Agmail.com. E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Maggaly Da Rio at 305 607-68/7
Firm/Company 5912 W 26 Ave Address Hi ALEAH F/ 33016 City/State and Zip Code MiRiam DEL Rio 5 Agmail.com. E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Maggaly on Rio at 305, 607-68/77
For further information concerning this matter, please call: Magaly Det Rio 10 at (305) 607-68/77
Address Hi ALEAH, Fl. 33016 City/State and Zip Code MiRiam DEL RIO 5 Damail.com. E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Magaly Da Rio at 305, 607-68/77
Hialean Fl 33016 City/State and Zip Code Miriam DEL Rio 5 Danail.com. E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Magaly Del Rio at 305, 607-68/17
MiRiam DEL RiO 5 ag mail.com. E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Magaly on Rio at 305, 607-68/77
MiRiam DEL RiO 5 ag mail.com. E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Magaly on Rio at 305, 607-68/77
For further information concerning this matter, please call: Magaly on Rio at 305, 607-68/7
For further information concerning this matter, please call: Magaly on Rio at 305, 607-68/7
1/4/14 OCC 10 at 300 00 00/11
Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Area Code Daytime Telephone Number STREET ADDRESS: Division of Corporations
Registration Section Registration Section P.O. Box 6327 Clifton Building
P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\Bigcup \frac{1}{2}\$130.00 Filing Fee & \$\Bigcup \frac{1}{2}\$155.00 Filing Fee & \$\Bigcup \frac{1}{2}\$160.00 Filing Fee, Certificate Certified Copy 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: (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") ALF 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.") (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability 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) 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. (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: 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) Signature of an authorized person 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.

bed or printed name of signee

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "2312 W 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 SIXTEENTH DAY OF MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "2312 W LLC" WAS FORMED ON THE SIXTH DAY OF APRIL, A.D. 2016.

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

Authentication: 202324165

Date: 05-16-16