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(((H16000142772 3)))



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Fax Number : (850) 617-6383

From:

Account Name : GRAYROBINSON, P.A. - ORLANDO

Account Number : 120010000078 Phone : (407)843-8880

: (407)244-5690 Fax Number

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

Email Address: Mark.Weinberg@gray-robinson.com

> Foreign Limited Liability Company VARI Investment, LLC

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COVER LETTER

TQ;	Registration Section Division of Corporation	15				
SUBJE	· VARI	investment, llc				
BCDGE	OII	Name of	Limited Liability C	ompany		,
The enc Existence	closed "Application by Force, and check are submitted	eign Limited Liability Com d to register the above refer	pany for Authorizat enced foreign limite	tion to Tra ed liability	usact Business in Florida," y company to transact busin	Certificate of less in Florida
Please r	eturn all correspondence o	oncerning this matter to the	following:			
	Mark S. Weinb	erg				
	Name of Person					
	GrayRobinson, P.A.					
	Firm/Company					
	333 SE 2nd Avenue, Suite 3200					
	Address					
	Miami, FL 33131					
	City/State and Zip Code Mark.Weinberg@gray-robinson.com					
		E-mail address: (to be use	d for future annual	report not	ification)	10 388 Value
For furt	her information concernin	g th is mat ter, please call				ECRETARY OF SELECTED.
	Mark S. Weinberg		305 st (416-68	80	2: O
	Name o	f Contact Person	Area Code	Day	time Telephone Number	n 3
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrati Clifton B 2661 Exe	CADDRESS: of Corporations ion Section uilding coutive Center Circle ice, FL 32301	
Enclose	d is a check for the follow ☐ \$125,00 Filing Fee	ing amount: \$\Boxed{\text{\ti}\text{\texitex{\text{\text{\text{\texi}\text{\text{\texict{\text{\texi}\text{\texit{\text{\text{\text{\text{\texi}\texit{\text{\text{\tet	☐ \$155.00 Filing Certified Copy		☐ \$160.00 Filing Fee, C of Status & Certified Cop	

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

	KISINESS IN THE STATE OF FLORIDA:		
, VARI Investment, L.L.	c		
(Name of For	reign Limited Liability Company; must inc	clude "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, onter a	alternate name adopted for the purpose of t	transacting business in Florids. The alternate name must	include "Limitou
2 Georgia		,	
(Jurisdiction under the law company is organized)	v of which foreign limited liability	(FEI number, if applicable)	
4	(Dale first transacted business in	Florida, if prior to registration.) 5, F.S. to determine penalty liability)	
5. 12380 NW 116 Aven		, r.o. to determine periodly deptility)	
Medloy, FL 33178			
, 12380 NW 136 Avenu	(Street Address of Princi	pal Office)	نبن ے
5. 12380 IVW 170 A Venu	- · · · · · · · · · · · · · · · · · · ·		5 P
Medley, FL 33178		·	16 JUH 10
	(Mailing Addre	:55)	
7. Name and street addites	ss of Florida registered agent: (P.O. B	ox NOT acceptable)	5
Name:	Argenis J. Contreras		PH
Office Address:	12330 NW 116 Avenue		5
	Medley (City)	, Florida 33178 (Zip code)	05
lesignated in this applica o complywith the prevision	egistered agent and to accept service of tion, I hereby accept the appointment	of process for the above stated limited liability con t as registered agent and agree to act in this capac erand-complete performance of my duties, and I	ity. I further agree
	(Registered a	ngcan (signdanie)	
	acity and address of the person(s) who	- N - 1 / ·	
Argenis J. Contretes	acity and address of the person(s) who	- N - 1 / ·	
Argenis J. Contreres —	acity and address of the person(s) who	- N - 1 / ·	
Argenia J. Contretas — 12380 NW 116 Avenue Medley, FL 33178 Attached is a certificate prisdiction under the law of the l	of existence, no more than 90 days old of which it is organized. (If the certifical brainted)	- N - 1 / ·	
Argenia J. Contretas — 12380 NW 116 Avenue Medley, FL 33178 Attached is a certificate prisdiction under the law of the translator must be such that the factor of the translator must be such that the factor of the translator must be such that the factor of the translator must be such that the factor of the translator must be such that the factor of the translator of the	of existence, no more than 90 days old of which it is organized. (If the certifical abmitted) Signeture of an	has/have authority to manage is/are: d, duly authenticated by the official having custody rate is in a foreign language, a translation of the cer	tificate under eath

(H160001427723)

Control Number: 08078048.

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

8078048 16 JUN 10 PH 2: 0:

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

VARI INVESTMENT, LLC

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is assued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facte evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number
Danz Inc/Auth/Filed
Jurisdiction
Print Date
Form Number

: 13173052 : 10/10/2008 : Georgia : 05/16/2016



B: P. Kemp Secretary of State