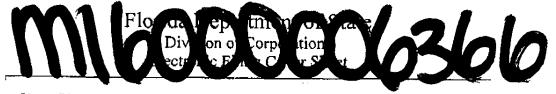
Division of Corporations

Page 1 of 2



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

প্রশাস্থা সংক্রম হাজে জালাল ও ক্রমেক্স ক্রমেন্ড জিলাও । জালাল প্রশাস্থান স্থান সম্প্রক ক্রমেণ্ডলের ব্যবহার । জালাল

IN COMPLIANCE WITH SECTION 603.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS. BY THE STATE OF FLORIDA:

COMPANY TO TRANSACT BUS Property Documents LL		EOF FLORIDA:			
		Company; must include	Limited Liability Co	mpany," "L.L.C.," or	"LLC.")
(If name unavailable, enter alto Liability Company," "L.L.C,"	rnste name adopted	for the purpose of transac	cting business in Flo	rida. The alternate nur	ne must include "Limited
DELAWARE	di 000. /	_	01 26	<u> </u>	
(Jurisdiction under the law of ecompany is organized)	which Ibreign limit	ed liability 3,	(FEI	O3939 number, il applicable)
. UPON QUALIFICATI	NO				
•		insacted business in Flori 05 0904 & 605.0905, F.S	da, if prior to registr to determine penult	ation.) y liability)	_
5					
906 11	SUMPLS	et Address of Principal C	Fort Lande	dale, F13	<u>3</u> ·3//
6	Same	as abo	4.0		
v	- JACO G	2 2 10.0	N-a l-d	· · · · · · · · · · · · · · · · · · ·	三三名 6
		(Mailing Address)			- ES
					年四 6 円
7. Name and street address	of Florida register	red agent: (P.O. Box)	<u>NOT_acceptable)</u>		気勢 コ 厂
Name:	AGENTS AND C	CORPORATIONS, IN	c		
Office Address:	300 FIFTH AVE	NUE SOUTH, SUITE	101-330		7 PS 3 D
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	NAPLES			34012	97 9
		(City)	, , , , , , , , , , , , , , , , ,	rida 34012 (Zip code)	- III 8
declarated in this applicat	gistered agent and Ion. I hereby acce.	ot the annalytiment of	revisiered avent a	nd agree to act in ti	bility compuny at the place his capacity. I further agree
to complywith the provision accept the obligations of r	ons of all statutes t ny nosition de resi	relative to the proper of stered offent.	n <i>d complete perjo</i> Agenta and	Corporations	es, and I am familiar with at . Inc.
accept me obligations of t			-		•
	Men	Obegistered agen	Asst. Secre	Lary	-
		_			
8. The name, title or caps	city and address of	f the person(s) who has	/have authority to	manage is/are:	
Cegar Es	tevez	<u>Ceo 90</u>	6 W 50A	atice Blue	<u> </u>
Fort Lau	ماما	E1 737	11		
			. / 	·	
		····			
9. Attached is a certificate jurisdiction under the law of the translator must be st	of which it is organ	ore than 90 days old, dized. (If the certificate	uly authenticated t	ry the official having guage, a translation	g custody of records in the of the certificate under oath
		Signature of an aut	horized person		-
This document is executed submitted in a document to	in accordance with	h section 605.0203 (1)	(b), Plorida Statute	s. I am gware that a provided for in 5.81	ny false information 17.155, F.S.
SPAINIMER III & GOCHMENT M	nie robarbiletir a	CRAR FS		F. 277442 107 111 510 1	· · · · · · · · · · · · · · · · · · ·

Typed or printed name of signee

<u>Delaware</u>

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PROPERTY DOCUMENTS 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 TENTH DAY OF AUGUST, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PROPERTY DOCUMENTS LLC" WAS FORMED ON THE THIRD DAY OF AUGUST, A.D. 2016.

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



6114695 8300

SR# 20165302848

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Authentication: 202803466

Date: 08-10-16