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## FLORIDA DEPARTMENT OF STATE Division of Corporations

July 8, 2016

YANINA MICULITZKI, ESQ. 20801 BISCAYENE BLVD, STE 306 AVENTURA, FL 33180

SUBJECT: LIBRA9803, LLC Ref. Number: W16000047586

We have received your document for LIBRA9803, 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Dionne M Scott Regulatory Specialist II

Letter Number: 016A00014305

ORETARY OF STATE

## **COVER LETTER**

**1** 

TO: .	Registration Section Division of Corporations	
SUBJE	DECT: LIBLA9803, LLC Name of Limited Liability Company	
	enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Flotence, and check are submitted to register the above referenced foreign limited liability company to transact	
Please r	se return all correspondence concerning this matter to the following:	
	Yanna MiculiTaki Esq. Name of Person	<u></u>
	Yanina Hi WUTZKI P. A Firm/Corhpany	<u>س</u> ريث
	Firm/Corfipany	- CG
	20801 biscayne blud. STE 306	FILED  AUG 22 PN 11: 00  CREANING STATE  CREAN
	Aventura FL, 33180  City/State and Zip Code	MII: 00
	Yanna @ Miculitzki Law. LOM  E-mail address: (to be used for future annual report notification)	
For furt	further information concerning this matter, please call:	
	Yanna Micultali Esq. at (786) 361 - 5567  Name of Contact Person Area Code Daytime Telephone Num	ber
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	
Enclose	osed is a check for the following amount:  \$\int \forall \fora	

, a IN FLORIDA	TO TRAINING BOU
IN COMPLIANCE WITH SECTION 6050902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTA COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	ER A FOREIGN LIMITED LIABILITY
1. LIBRAGES LLC (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 alternat Liability Company," "L.L.C," or "LLC.")	e name must include "Limited
2. Delawace 3. SPP (Jurisdiction under the law of which foreign limited liability (FEI number, if applied)	lied for
2. Dela wa re (Jurisdiction under the law of which foreign limited liability company is organized)  3. FEI number, if applied	cable)
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	<del></del>
5. 19950 W. country club dr., STE 903, Aventure	<del>?</del>
Flou da 33180 (Street Address of Principal Office)	
	<u> </u>
6. 19950 W. COUNTRY Club da, STE 903, Aventu	GT AND FI
——————————————————————————————————————	11 LE 6 22 11 SSS
(Mailing Address)	
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Name: Yanna Miculitaki 1859.	D BY II: 00
Office Address: 20801 BISCAYNE BIVA. STE 306	A Comment
City), Florida 33/1	<u>හිට</u>
(City) (Zip code Registered agent's acceptance:	e)
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 to comply with the provisions of all statutes relative to the proper and complete performance of my d	
accept the obligations of my position as registered agent.	mico, una i am jamanar more una
(Registered agent's signature)	<del></del>
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
Bright way Properties, LLC ITS manager	
19950 W. COUNTRY CLUB dr. STP. 903	
Aventura, Fl 33180	
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official har jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translati 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.

Esepuiel Garedor
Typed or printed name of signeé

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "LIBRA9803 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 "LIBRA9803 LLC"
WAS FORMED ON THE FOURTH DAY OF FEBRUARY, A.D. 2016.

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





5955432 8300 SR# 20165306174 Authentication: 202804782

Date: 08-10-16

You may verify this certificate online at corp.delaware.gov/authver.shtml