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COVER LETTER

TO:

Registration Section Division of Corporations

	•				
			pany for Authorization to Trenced foreign limited liabilit		
Please return a	all correspondence o	oncerning this matter to the	following:		
	Christina Herna	ndez		•	.' '
Name of Person					
	USREDA Mana	agement LLC			
		Fi	rm/Company		-
	9200 Belvedere	Road, Ste. 202			·
			Address		-
	Royal Palm Bea	nch, Florida 33411			
		City/S	tate and Zip Code		-
	christina.hernand	_		•	
	•	E-mail address: (to be used	d for future annual report no	tification)	
For further inf	formation concerning	g this matter, please call:		•	
Chris	stina Hernandez		561-288-856 at ()	·	, -
	Name o	f Contact Person	Area Code Da	ytime Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
	check for the follow 125.00 Filing Fee	ing amount: \$\Bigsim \\$130.00 \text{ Filing Fee & Certificate of Status}	□ \$155.00 Filing Fee & Certified Copy	■ \$160.00 Filing Fee, C of Status & Certified Co	



August 16, 2016

CHRISTINA HERNANDEZ 9200 BELVEDERE RD, STE 202 ROYAL PALM BEACH, FL 33411

SUBJECT: USREDA MANAGEMENT LLC

Ref. Number: W16000056670

We have received your document for USREDA MANAGEMENT LLC and your check(s) totaling \$160.00. 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.

Letter Number: 516A00017232

Octavia I Simmons Regulatory Specialist II

www.sunbiz.org

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:

USREDA Management (Name of Fore	ign Limited Liability Company; must include "Limited	Liability Company," "L.I	L.C.," or "LLC.")	y neigh an seitheadach airstead agus agus ann an ann ann ann ann ann ann ann ann
	ternate name adopted for the purpose of transacting bus	iness in Florida. The alte	rnate name must in	iclude "Limited
Liability Company," "L.L.C."		,		
Delaware •	of which foreign limited liability 3. 81-177262	(FEI number, if ap	untinobla)	
company is organized)	· ·	tres number, map	pricable	
ł				
	(Date first transacted business in Florida, if pric (See sections 605.0904 & 605.0905, F.S. to deter	or to registration.) mine penalty liability)	•	
.	9200 Boldedell St	ste 202		
	To a Contract of	71 - 2/1/		
,	Koyal Galm Doch,	+1 334 //		_ =
	(Street Address of Principal Office)			क ं
).	-			E tt
			17.5	1
	. (Mailing Address)		SE	emeration
7. Name and street addres	is of Florida registered agent: (P.O. Box NOT acc	ceptable)	me	3 100
-	REGISTERED AGENTS INC	·	- FLO	
Name:) RE	; ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
Office Address:	3030 N. ROCKY POINT DRIVE, STE 150A	· · · · · · · · · · · · · · · · · · ·	· ×	1
	TAMPA	Florida 33607		
Registered agent's accep	(City)	(Zip	code) .	
lesignated in this applica o complywith the provision	gistered agent und to accept service of process fortion, I hereby accept the appointment as registere ons of all statutes relative to the proper and company position as registered agent.	ed agent and agree to a	ict in this capaci	ity. I further agre
	(Registered agent's signatu	ure)		
8. The name, title or capa	acity and address of the person(s) who has/have au	thority to manage is/are	•	
oseph Walsh, Manager			•	•
9200 Belvedere Road, Ste	202			white
Royal Palm Beach; FL 33	**************************************		······································	
Coyal I ann Beach; I L 55	T11		······································	
Attached is a certificate urisdiction under the law	of existence, no more than 90 days old, duly auther of which it is organized. (If the certificate is in a fortunal)	enticated by the official oreign language, a trans	having custody dation of the cert	of records in the lificate under oath
of the translator must be si	ionnaed)			
	X		•	•
	Signature of an authorized po	erson	- <u> </u>	
of the translator must be so . This document is executed	X (m	ida Statutes. I am aware	that any false in in s.817,155, F.S	tormation

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 "USREDA MANAGEMENT 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 THIRTY-FIRST DAY OF AUGUST, A.D. 2016.

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

TANKS OF THE PARTY OF THE PARTY

Authentication: 202918429

Date: 08-31-16