# 146000008516

(Re	questor's Name)					
(Ad	dress)					
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(Cit	y/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
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(Document Number)						
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# FLORIDA DEPARTMENT OF STATE Division of Corporations

September 30, 2016

TED CHASE 340 9TH STREET NORTH, SUITE 85 NAPLES, FL 34102

SUBJECT: EUDAEMONIA REAL PROPERTY, LLC

Ref. Number: W16000067374

We have received your document for EUDAEMONIA REAL PROPERTY, LLC and your check(s) totaling \$130.00. 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.

Tanisha L Washington Regulatory Specialist II

Letter Number: 316A00021077

### **COVER LETTER**

TO:	egistration Section ivision of Corporations					
SUBJEC	Eudaemonia Properties, LLC					
	Name of Limited Liability Company					
	ned "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Ce and check are submitted to register the above referenced foreign limited liability company to transact business					
Please re	rn all correspondence concerning this matter to the following:					
	Ted Chase					
	Name of Person					
	Eudaemonia Properties, LLC					
	Firm/Company					
	340 9th Street North, Suite 85,					
	Address					
	Naples, FL 34102					
	City/State and Zip Code					
	crawfish.1@hotmail.com					
	E-mail address: (to be used for future annual report notification)					
For furth	information concerning this matter, please call:					
	'ed Chase 310 809-0082 at ( )					
	Name of Contact Person Area Code Daytime Telephone Number					
	MAILING ADDRESS:STREET ADDRESS:division of CorporationsDivision of Corporationsegistration SectionRegistration Section.O. Box 6327Clifton Buildingallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301					
Enclosed	s a check for the following amount:  1 \$125.00 Filing Fee  \$\ \text{\$\subseteq}\$ \$130.00 Filing Fee &  \text{\$\subseteq}\$ \$155.00 Filing Fee &  \text{\$\subseteq}\$ \$160.00 Filing Fee, Certified Copy	ficate				

# 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

		L		
1. EUDAEMONIA PRO				
	reign Limited Liability Company; r	nust include "Limite	Liability Company," "L.L.C.," o	or "LLC.")
EUDAEMONIA REAL	PROPERTY, LLC			
Liability Company," "L.L.C	alternate name adopted for the purp "," or "LLC.")	_		ame must include "Limited
2. STATE OF TEXAS		3. 3206146	9154	
company is organized)	v of which foreign limited liability		(FEI number, if applicable	e)
4. NOT APPLICABLE	(NO TRANSACTIONS PRIOF			
5 TWO RIVERWAY, S	(Date first transacted bus (See sections 605,0904 & 6	iness in Florida, if pr 05.0905, F.S. to dete	ior to registration.) rmine penalty liability)	
5. TWO KIVEKWAI, 3	OUTE 1000	<del></del>	<del></del>	
HOUSTON, TEXAS	77056			
	(Street Address of	of Principal Office)		
6. 340 9TH STREET NO	ORTH, SUITE 85			
NAPLES, FLORIDA	34102			<b></b>
<u></u>	(Mailin	g Address)		<del></del>
7. Name and street addres	ss of Florida registered agent: (	PO Box NOT ac	centable)	eng.
Name:	TED CHASE	1.0.00x <u>1.01</u> 40	- certain	5
Office Address:	825 11TH AVE SOUTH		<del>*****</del>	<b>8</b> 8
Office Address.	NAPLES	<del></del>	34102	AKY AKY
	(City)		, Florida Zip code)	
designated in this applica to complywith the provisi	egistered agent and to accept se tion, I hereby accept the appoi ions of all statutes relative to th my position as registered agen	ntment as register e proper and com t Chase	ed agent and agree to act in ti plete performance of my dutie	his capacity of further agree
	(Reg	istered agent's signat	ure)	
8. The name, title or capa	acity and address of the person(	s) who has/have au	thority to manage is/are:	
-	IZED REPRESENTATIVE	-, <del></del>	sales y se postanage ser an er	
340 9TH STREET NORT	TH, SUITE 85, NAPLES, FLOI	RIDA 34102		<del></del>
				<del></del>
		· <del>-</del>		
9. Attached is a certificate urisdiction under the law of the translator must be so		days old, duly authorentificate is in a formal of the control of t	oreign language, a translation of	custody of records in the of the certificate under oath
This document is executed	in accordance with section 605	0203 (1) (b) Flam	da Statutas I am awara that an	ni falsa information
ubmitted in a document to	the Department of State consti	tutes a third degree	felony as provided for in s.81	7.155, F.S.

TED CHASE

Typed or printed name of signee

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Carlos H. Cascos Secretary of State

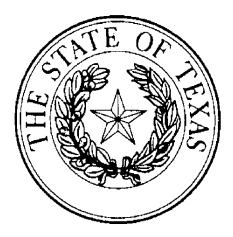
# Office of the Secretary of State

## Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Eudaemonia Properties, LLC (file number 802535209), a Domestic Limited Liability Company (LLC), was filed in this office on September 02, 2016.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 25, 2016.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Carlos H. Cascos Secretary of State

Come visit us on the internet at http://www.sos.state.tx.us/

Fax: (512) 463-5709 TID: 10264 Dial: 7-1-1 for Relay Services Document: 695981760003