M1600008769

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(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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SECRETARY OF STATE

D. BRUCE WW 0 2 2016



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 26, 2016

ANA COSCULLUELA ESQ. THE JACOBS LAW GROUP 20700 W DIXIE HWY AVENTURA, FL 33180

SUBJECT: 510-514 NE 4TH AVE LLC

Ref. Number: W16000072691

We have received your document for 510-514 NE 4TH AVE LLC and your check(s) totaling \$375.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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 (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 816A00022941

- المدر

COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT:	510 -514 NE 4TH	AVE LLC				
SOINECT.	 	Name of I	Limited Liability (Company		_
		eign Limited Liability Comp I to register the above refere				
Please return a	Il correspondence c	oncerning this matter to the	following:			
	Ana Cosculluela	a Esq.				
	· · · · · · · · · · · · · · · · · · ·	Na	ame of Person			_*
	The Jacobs Law	Group				
	-	Fi	rm/Company			-
	20700 W Dixie	Hwy				
			Address		 -	_
	Aventura, Florid	la 33180				
		City/Si	tate and Zip Code			_
	annie@thejacobs	lawgroup.com				
		E-mail address: (to be used	I for future annua	report notification)	_
For further inf	ormation concerning	g this matter, please call:			IA S	<u>~</u>
Ana	Cosculluela, Esq.		305 at (405-4444	ECRE	
	Name o	f Contact Person	Area Code	Daytime Tel	ephone Minber	V
Divis Regis P.O.	LING ADDRESS: ion of Corporations stration Section Box 6327 hassee, FL 32314			STREET ADDR Division of Corpo Registration Secti Clifton Building 2661 Executive C Tallahassee, FL 3	ESS: EF CO rations FLORIES on RIPER	FILED
	check for the follow 25.00 Filing Fee	ing amount: \$\Bigcup \text{\$130.00 Filing Fee & Certificate of Status}\$	☐ \$155.00 Filid		0.00 Filing Fee, us & Certified C	

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:

1. <u>510-514 NE 4TH AVE</u> (Name of Fore	LLC sign Limited Liability Company; must include "Limited Lia	ability Company," "L.L.C.," o	or "LLC.")	
(If name unavailable, enter al Liability Company," "L.L.C,	ternate name adopted for the purpose of transacting busine	ss in Florida. The alternate n	ame must inc	lude "Limited
2. Delaware	₃ 80-1093344			
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicab	le)	
4.				
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine	o registration.) ne penalty liability)		
5. 600 Parkview Drive #2	220			
Hallandale, Florida 330	009			
	(Street Address of Principal Office)			
6. <u>600 Parkview Drive #2</u>	20			
Hallandale, Florida 330	009			
	(Mailing Address)			•
7. Name and street addres	ss of Florida registered agent: (P.O. Box NOT accep	table)	0350	= = =
Name:	Mauricio Bonifacio		ARE S	
	600 Parkview Drive # 220		ARY YRAY	
Office Address:			mm	o M
	Hallandale, Florida (City)	, Florida <u>33009</u> (Zip code)	— Г	ë O
Registered agent's accep	· • • •	(zip code)	TATE	
designated in this applicate to complywith the provision	gistered agent and to accept service of process for the tion, I hereby accept the appointment as registered ons of all statutes relative to the proper and completed my position as registered agent. (Registered agent's signature)	ugent and agree to act in a gree performance of my duti	this capacity	y. I further agre
8. The name, title or capa	acity and address of the person(s) who has/have autho	rity to manage is/are:		
Mauricio Bonifacio —	nanage (MB)			
600 Parkview Drive #220				·
Hallandale, Florida 33009)			
	of existence, no more than 90 days old, duly authention of which it is organized. (If the certificate is in a fore abmitted)			
•	Signature of an authorized person	on .		

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.

Mauricio Bonifacio

<u>Delaware</u>

The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "510-514 NE 4TH AVE, 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 TWENTY-EIGHTH DAY OF SEPTEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "510-514 NE 4TH AVE, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF JULY, A.D. 2016.

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

Authentication: 203072563

Date: 09-28-16

6100660 8300 SR# 20165977465