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SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724 SUNSHINECORPORATE2014@GMAIL.COM

Date: 11-29-16
ENTITY NAME:
Horowtz Family Investments, LLC
PLEASE FILE THE ATTACHED AND RETURN:
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Certified Copy
<u> </u>
PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY:
Document Number:
Certified Copy of Arts & Amendments
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APOSTILLE'/NOTARIAL CERTIFICATION:
COUNTRY OF DESTINATION
NUMBER OF CERTIFICATES REQUESTED
TOTAL AMOUNT OWED: 55
CHECK NUMBER: 3111
PLEASE CONTACT TINA OR ERIC AT 850-656-4724 FOR ANY PROBLEMS OR INFORMATION ON THIS MATTER.
Thank you!

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:

namo unavallable, enter att ability Company," "L.L.C,"	ternate name adopted for the purpose of "LLC.")	of transacting bu	siness in Florida. The alternate name	e must inclu	de "Limited
Delaware		3.			
Jurisdiction under the law (company is organized)	of which foreign limited liability	Name of the Owner, which did not the Owner,	(FBI number, if applicable)		
Upon filing					
	(Date first transacted business (See sections 605.0904 & 605.09	i în Plorida, if pi 905, P.S. to dote	ior to registration.) nnine penalty Hability)		
6075 Pelican Bay Boul	•				
Naples, Florida 34108					
	(Street Address of Pr	incipal Office)		•	
6075 Pelican Bay Bould	evard #PH-A			-	
Naples, Florida 34108					
	(Mailing A	ddress)	a ya gana an	•	
Name and street addres	s of Florida registered agent: (P.C). Box <u>NOT</u> a	coeptable)		
Name:	Michael Horowitz			^	
	6075 Pelican Bay Boulevard #PI	H_A		it in a	
Office Address:					16 MOV 2
	Naples		Florida 34108 (Zip code)	SSVH SSVH	NO.
	(City)		(Zip code)	SE	13
egistered agent's accep	tance:				
laving been named as re esignated in this applica o complywith the provisi	gistered agent and to accept servi don, I hereby accept the appoint ions of all statutes relative to the p my position as registered agent.	nent as registe proper and can	red agent and agree to act in the oplete performance of my duties	is capacity.	Hurther hei
laving been named as re esignated in this applica o complywith the provisi	gistered agent and to accept servi don, I hereby accept the appoint ions of all statutes relative to the p my position as registered agent.	nent as registe	red agent and agree to act in the oplete performance of my duties	is capacity.	Hurther hei
Javing been named as reestgnated in this applicate complywith the provision coept the obligations of the state of the stat	gistered agent and to accept servi don, I hereby accept the appoint ions of all statutes relative to the p my position as registered agent.	nent as registeroper and con	red agent and agree to act in the applete performance of my duties ature)	is capacity.	Hurther hei
Javing been named as reestgnated in this applicate complywith the provision coept the obligations of the state of the stat	egistered agent and to accept serviction, I hereby accept the appointments of all statutes relative to the pmy position as registered agent. (Registered and address of the person(s)	nent as registeroper and con	red agent and agree to act in the applete performance of my duties ature)	is capacity.	Hurther hei
Javing been named as reesignated in this applicate complywith the provision coupt the obligations of the control of the contro	egistered agent and to accept serviction, I hereby accept the appointments of all statutes relative to the pmy position as registered agent. (Registered and address of the person(s)	nent as registeroper and con	red agent and agree to act in the applete performance of my duties ature)	is capacity.	Hurther hei
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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.

Richard Berkowitz

<u>Delaware</u>

The First State

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

DELAWARE, DO HEREBY CERTIFY "HOROWITZ FAMILY INVESTMENTS, 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-NINTH DAY OF NOVEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HOROWITZ FAMILY INVESTMENTS, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF NOVEMBER, A.D. 2016.

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

Authentication: 203408992

Date: 11-29-16