11000001109

(Re	questor's Name)	· · · ·
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Na	me)
(Do	ocument Number)	
Certified Copies	_ Certificate	s of Status
Special Instructions to	-	
ſ	U	lφ.
Need own	sent U	2. Ed.
name	2/8/1	7
• •	Office Use Or	



900293493639

01/17/17--01022--002 **160.00

M. MILLIGAN FEB 08 2017

W17 - (1(1)7

Anna West BC Ellsworth LLC 6911 Pistol Range Road, Suite 101A Tampa, FL 33635

February 8, 2017

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

This letter is to inform you that BC Ellsworth LLC has no intention of revoking the voluntary dissolution of the company originally organized in the state of Florida. We therefore ask the State of Florida to release the name BC Ellsworth LLC.

Kindest regards,

Anna West

Florida Registered Agent

BC Ellsworth LLC

of Note - Domustic + Ferragin entités are



2017 FEB -6 PM 4: 08

FLORIDA DEPARTMENT OF STATE OF Division of Corporations

January 25, 2017

APRIL JORDAN 6911 PISTOL RANGE RD SUITE 101B TAMPA, FL 33635 US

SUBJECT: BC ELLSWORTH LLC Ref. Number: W17000004417

We have received your document for BC ELLSWORTH 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):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 117A00001155

COVER LETTER

TO:

Registration Section

Division of Corporations					
BC ELLSWORTH LLC SUBJECT:					
Name of Limited Liability Company					
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.					
Please return all correspondence concerning this matter to the following:					
April Jordan					
Name of Person					
Proluxe Properties					
Firm/Company					
6911 Pistol Range Rd., Suite 101B					
Address					
Tampa, FL 33635					
City/State and Zip Code					
april@proluxeproperties.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
April Jordan 727 532-3020 at ()					
Name of Contact Person Area Code Daytime Telephone Number					
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301					
Enclosed is a check for the following amount: □ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status Certificate of Status □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status & Certified Copy					

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:

	OMBAS IN THE STAITE OF FLORID.						
1. BC ELLSWORTH LL	C eign Limited Liability Company; m	ust inch	ude "Limited Lia	hility Company "" C " or :	41 <u>C</u> 5		
(Tame of Forest	ты этте оприну	100 HIGH	12111111EU 121A	omity company. 12.12.6., th	DEC.)		
(If name unavailable, enter a Liability Company," "L.L.C,	Iternate name adopted for the purpor or "LLC.")	se of tri	ansacting busines	s in Florida. The alternate name	e must include	"Limite	:d
2. Delaware		3.	32-0514919				
(Jurisdiction under the law company is organized)	of which foreign limited liability		·	(FEI number, if applicable)			
4.							
••	(Date first transacted busin (See sections 605.0904 & 605	ess in F	lorida, if prior to	registration.)		r> 7	
5. 6911 Pistol Range RD	Color Int A			pointing maining)		=======================================	5. ,
Tampa, FL 33635							• • • • • • • • • • • • • • • • • • • •
T Shirt T T Shirt Shirt	(Street Address of	Princip	oal Office)	,_u=		OS.	يىي أ
6. 6911 Pistol Range RD.	Suite 101 A				•		; *
6. 6911 Pistol Range RD, Suite 101 A Tampa, FL 33635		· : ·	73 F.				
	(Mailing	Addres	ss)		ر . منتان	* >4 > +44	
7. Name and street address	ss of Florida registered agent: (P	2.O. Bc	ox NOT accept	able)	ا سمالاً د	\bigcirc	
Name:	Anna West		•	•			
Office Address:	6911 Pistol Range Road			_			
Office Address.	Tampa			. Florida 33635 (Zip code)			
	(City)			, Florida(Zip code)	-		
designated in this applica to complywith the provisi	gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent.	itment prope	as registered a	gent and agree to act in thi. performance of my duties,	s capacity. I	further	r agree
	acity and address of the person(s) who l	has/have author	rity to manage is/are:			
BREA 3-DIVILLC	- MGR						
6911 Pistol Range Road.	Suite 101A						
Tampa, FL 33635							
	of existence, no more than 90 d of which it is organized. (If the oubmitted) Signature	certific	ate is in a forei	gn language, a translation of			
	Signatur	e of an	authorized perso	n	-		
This document is executed submitted in a document to	d in accordance with section 605, the Department of State constit	.0203 (utes a f	1) (b), Florida third degree fel	Statutes. I am aware that any ony as provided for in s.817.	/ false inform .155, F.S.	ation	

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 "BC ELLSWORTH 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 THIRTIETH DAY OF JANUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BC ELLSWORTH LLC" WAS FORMED ON THE TENTH DAY OF JANUARY, A.D. 2017.

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

2017 FES -6 PS 4:10

A CONTRACTOR OF THE PARTY OF TH

Authentication: 201953499

Date: 01-30-17