

M17 000001315

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

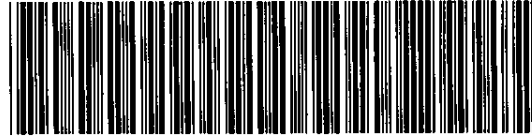
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W16-75025
2980

Office Use Only



500291763725

11/03/16--01022--014 **130.00

FEB 15 2017
S. YOUNG

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 NOV -3 4H10:36



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 4, 2016

ROMY KAPOOR
5555 GLENRIDGE CONNECTOR STE 200
ATLANTA, GA 30342

SUBJECT: KAPOOR LUTHER & LOFTMAN IMMIGRATION PARTNERS, LLC
Ref. Number: W16000075025

We have received your document for KAPOOR LUTHER & LOFTMAN IMMIGRATION PARTNERS, 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):

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), Authorized Person (AP), or Authorized Representative (AR).

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 016A00023823

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
16 NOV -3 AM 10:47

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kapoor, Luther & Loftman Immigration Partners, LLC
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:

Romy Kapoor

Name of Person

Kapoor, Luther & Loftman Immigration Partners, LLC

Firm/Company

5555 Glenridge Connector, Suite 200

Address

Atlanta, GA 30342

City/State and Zip Code

rkapoor@KLLImmigration.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Romy Kapoor

404

459-2505

Name of Contact Person

at ()

Area Code

Daytime 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

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

16 NOV -3 AM 10:47
STATE OF FLORIDA
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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. Kapoor, Luther & Loftman Immigration Partners, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

n/a

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited
Liability Company," "L.L.C.," or "LLC.")

2. Georgia

(Jurisdiction under the law of which foreign limited liability
company is organized)

3. 81-2110699

(FEI number, if applicable)

4. 04/15/2016

(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 5555 Glenridge Connector, Suite 200

Atlanta, GA 30342

(Street Address of Principal Office)

6. 5555 Glenridge Connector, Suite 200

Atlanta, GA 30342

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Romy Kapoor

Office Address: 4767 New Broad Street, #1032

Orlando

(City)

Florida 32814

(Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place
designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree
to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and
accept the obligations of my position as registered agent.

Romy Kapoor

(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Romy Kapoor

☒

AMBR

Severine Luther

☒

AMBR

Liliana Loftman

☒

AMBR

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the
jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath
of the translator must be submitted)

Romy Kapoor

Signature of an authorized person

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.

Romy Kapoor

Typed or printed name of signer

16 NOV -3 AM 10:47

STATE OF FLORIDA
FALL AND SPRING 2016

STATE OF GEORGIA

Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

RECEIVED
FALL 16 11:17
16 NOV -3 AM 10:47

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

Kapoor Luther & Loftman Immigration Partners, LLC

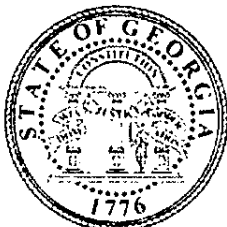
a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number	: 13551113
Date Inc/Auth/Filed	: 04/05/2016
Jurisdiction	: Georgia
Print Date	: 10/29/2016
Form Number	: 211



B. P. Kemp

Brian P. Kemp
Secretary of State