

M17000001991

(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:

W17-8928

Office Use Only



800293477158

01/27/17--01018--012 **125.00

FILED
17 MAR -8 AM 10:14

MAR 09 2017
O SIMMONS

11
647



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 16, 2017

JORGE HERNANDEZ
1942 MARTINA ST
APOKA, FL 32703

SUBJECT: ABS ALLIANCE LLC
Ref. Number: W17000008928

We have received your document for ABS ALLIANCE LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

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.

Octavia I Simmons
Regulatory Specialist II

Letter Number: 417A00003139

RECEIVED
2017 MAR -8 AM 11:53
REGULATORY DIVISION
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 31, 2017

JORGE HERNANDEZ
1942 MARTINA ST
APOKA, FL 32703

SUBJECT: ABS ALLIANCE LLC
Ref. Number: W17000008928

RECEIVED
2017 FEB 13 PM 3:33
SEAL OF THE STATE OF FLORIDA
TALLAHASSEE, FLORIDA

We have received your document for ABS ALLIANCE LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia I Simmons
Regulatory Specialist II

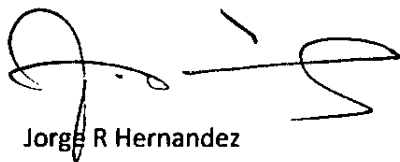
Letter Number: 617A00001952

ABS Alliance LLC
1942 Martina ST
Apopka FL, 32703

Florida Department of State
Division of corporations;

Via this letter, I Jorge R Hernandez General Partner of ABS Alliance, is requesting to The Division of Corporations to Please keep the Company name as ABS Alliance LLC to do business in the state of Florida, since ABS Alliance LLC was previously registered by Me and I had filed a Dissolution, and I Have no intention to reinstate it in the state of Florida.

Regards

A handwritten signature in black ink, appearing to read 'Jorge R Hernandez', with a stylized flourish at the end.

Jorge R Hernandez
General manager
ABS ALLIANCE LLC

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ABS ALLIANCE 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:

JORGE R HERNANDEZ

Name of Person

ABS ALLIANCE LLC

Firm/Company

1942 MARTINA ST

Address

APOPKA FLORIDA 32703

City/State and Zip Code

ABSALLIANCE11@GMAIL.COM

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

For further information concerning this matter, please call:

JORGE R HERNANDEZ

786

426-5791

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

**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. **ABS ALLIANCE LIMITED LIABILITY COMPANY**

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

(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. **NEW JERSEY**

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

3. **20-0436905**

(FEI number, if applicable)

4. **FEBRUARY 10, 2017**

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

5. _____

1942 MARTINA ST APOPKA FL 32703

(Street Address of Principal Office)

6. _____

2014 EDGEWATER DR ORLANDO FL 32804

(Mailing Address)

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


Name: **JORGE R HERNANDEZ**

Office Address: **1942 MARTINA ST**

APOPKA, Florida **32703**
(City) (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.

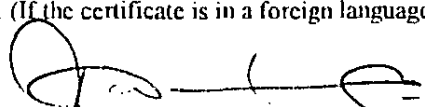

(Registered agent's signature)

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

JORGE R HERNANDEZ GENERAL PARTNER, 1942 MARTINA ST APOPKA FL 32703

SUSAN J TORPPEY, GENERAL PARTNER 6541 NUTHATCH Ln #40 ORLANDO FL 32810

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)


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.

JORGE R HERNANDEZ

Typed or printed name of signee

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

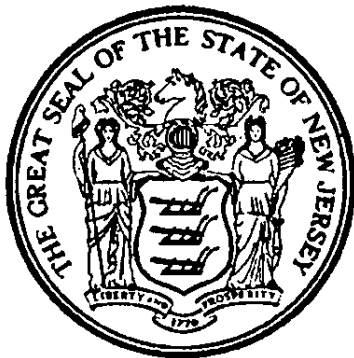
ABS ALLIANCE LIMITED LIABILITY COMPANY
0400043877

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on December 04, 2003.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

JORGE R HERNANDEZ
142 BEDFORD AVE
ISELIN, NJ 08830



IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal at Trenton, this
6th day of March, 2017

Ford M. Scudder
Acting State Treasurer

Certificate Number : 6078085036

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp