M17000002338

(Re	questor's Name)	
(Add	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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O SIMMONS O

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT	NO.	:	I200	000	00195
				~~~	

REFERENCE : 568175 7833946

AUTHORIZATION

COST LIMIT (\$ 125.00

ORDER DATE: March 23, 2017

ORDER TIME : 10:01 AM

ORDER NO. : 568175-005

CUSTOMER NO: 7833946

#### FOREIGN FILINGS

NAME: ALJ HOLDINGS TT, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

#### COVER LETTER

	stration Section sion of Corporation	as				
SUBJECT:	ALJ HOLDINGS T	T, LLC				
		Name of	Limited Liability (	Company		
The enclosed Existence, and	"Application by For I check are submitte	eign Limited Liability Comp d to register the above refer	oany for Authoriza enced foreign limi	ition to Tra ted liability	unsact Business in Florida," Certificat y company to transact business in Flor	e of rida.
Please return	all correspondence c	oncerning this matter to the	following:			
	Camilo Miguel	, Jr.				
		N	ame of Person		and the state of t	
	ALJ HOLDING	38 TT, LLC				
		Fi	rm/Company		1-1 _m	
	119 Washingto	n Avenue, Suite 505				
			Address			
	Miami Beach, l	FL 33139				
		City/S	tate and Zip Code			
	cmigueljr@yaho	o.com				
		E-mail address: (to be use	for future annua	report not	ification)	
For further in	formation concernin	g this matter, please call:				
Carr	nilo Miguel, Jr.		305 at (	531-242	26	
<u> </u>	Name o	f Contact Person	Area Code	Day	time Telephone Number	
Divi: Regi P.O.	ILING ADDRESS: sion of Corporations stration Section Box 6327 shassee, FL 32314			Division Registrati Clifton B 2661 Exe	CADDRESS: of Corporations ion Section uilding acutive Center Circle ace, FL 32301	
	check for the follow 125.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Fifit 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. ALJ Holdings TT, LLC	ign Limited Liability Company; must include "Limi	ted Liability Company ""L.L.C." or "I	LC"
(ranc or rote	gn Entired Enterty Company, mast melade Entire	ted Elabitity Company, E.E.C., or 1	
Liability Company," "L.L.C,"	ernate name adopted for the purpose of transacting or "LLC.")	business in Florida. The alternate name	must include "Limited
2. Delaware	3		
(Jurisdiction under the law ( company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4	(Date first transacted business in Florida, if (See sections 605.0904 & 605.0905, F.S. to de	prior to registration.) termine penalty liability)	
5. 119 Washington Ave, S	Ste. 505		
Miami Beach, FL 3313	9		÷ =
	(Street Address of Principal Office)		
6. 119 Washington Ave, S	te. 505	*** - *** - ***************************	7 H 2
Miami Beach, FL 3313	39		7 报题 24 第
	(Mailing Address)		
7. Name and street addres	s of Florida registered agent: (P.O. Box NOT	acceptable)	, Ø
Name:	Corporation Service Company	<u>-</u>	. 'Ŭ
Office Address:	1201 Hays Street		
	Tallahassee	, Florida <u>32301</u>	
Registered agent's accept	(City)	(Zip code)	
Having been named as rej designated in this applicat to complywith the provision	gistered agent and to accept service of procession, I hereby accept the appointment as registers of all statutes relative to the proper and comy position as registered agent.  (Registered agent's sig	mplete performance of my duties,  Melissa	capacity. I further agree and I am familiar with an Zender
-	city and address of the person(s) who has/have are limited liability company (Manager)	authority to manage is/are:	
119 Washington Avenue,	Ste. 505		
Miami Beach, FL 33139	•		•
	of existence, no more than 90 days old, duly at of which it is organized. (If the certificate is in abmitted)		
	Signature of an authorize	d person	
	in accordance with section 605.0203 (1) (b), F		

Camilo Miguel, Jr., Vice President

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 "ALJ HOLDINGS TT, 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-THIRD DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALJ HOLDINGS TT, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF MARCH, A.D. 2017.

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

Authentication: 202254861

Date: 03-23-17