m170000002730

| (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: CET WIT 33322 Fitle | | |
| | | |
| | | |

Office Use Only



700296022507

03/16/17--01014--013 **160.00

HAR 29 P 1: 05" CRETARY OF STATE ANASSEE, FLORIDA. TED

S Warren MAR 3 0 2017



March 17, 2017

NENA ALSAKER 7314 HERMES COURT APOLLO BEACH, FL 33572

SUBJECT: NENA ALSAKER, LLC Ref. Number: W17000023322

We have received your document for NENA ALSAKER, 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):

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.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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.

Stacey M Warren Regulatory Specialist II

Letter Number: 117A00005179

Division of Compositions D.O. DOV 6297 Tollahooma Florida 2021

Nena Alsaker, LLC 7314 Hermes Court Apollo Beach, FL 33572

March 13, 2017

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

RE: Authorization to transact Business

To Whom It May Concern:

Please find enclosed my application for authorization to transact business in the State of Florida. Also find attached the requested Limited Liability Company Annual Report for Nena Alsaker LLC, currently registered in the State of North Carolina.

I have included a check in the amount of \$160.00 for filing fee, Certificate of Status & Certified Copy of final authorization.

Thank you in advanced for your attention.

Nena Alsaker

COVER LETTER

| Division of Corporations | |
|---|---|
| SUBJECT: Nena 1-16 | AKER, LLC |
| Name of | Limited Liability Company |
| The enclosed "Application by Foreign Limited Liability Com Existence, and check are submitted to register the above refe | pany for Authorization to Transact Business in Florida," Certificate of renced foreign limited liability company to transact business in Florid |
| Please return all correspondence concerning this matter to the | e following: |
| Nena al | baker |
| | Name of Person |
| Nena U | baker, hlc |
| 1 | firm/Company |
| <u>7314 Herm</u> | es Court |
| ^ | Address |
| APOLLO BI | EACH, FL 33572 |
| City/ | State and Zip Ćode |
| E-mail address: (to be us | ed for future annual report notification) |
| | ter tutal and an approximation of |
| For further information concerning this matter, please call: | |
| New Albaker Name of Contact Person | at (<u>828</u>) <u>246-3099</u> Area Code Daytime Telephone Number |
| MAILING ADDRESS: Division of Corporations | STREET ADDRESS: Division of Corporations |
| Registration Section | Registration Section |
| P.O. Box 6327 Tallahassee, FL 32314 | Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |
| Enclosed is a check for the following amount: | 412 |
| □ \$125.00 Filing Fee □ \$130.00 Filing Fee & | ☐ \$155.00 Filing Fee & \$\iiii \$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: |
|--|
| Nena Albaker III |
| (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 Lightling Company." "I. L. C." or "I. L. C.") |
| Liability Company," "L.L.C," or "LLC.") NIC 47. 257(17) |
| 2. (Jurisdiction under the law of which foreign limited liability company is organized) 3. 47-2574760 (FEI number, if applicable) |
| N/A |
| (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. 14 determine penalty liability) |
| 5. 1314 Hernes Court |
| Apoilo Beach, Fl. 33572 |
| (Street Address of Principal Office) 1314 TIN MAS (DULT |
| Apoilo Beuch FL 33572 |
| (Mailing Address) |
| 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) |
| Name: Neur Albaken |
| Office Address: 7314 Henries Count |
| 10.11 Beach CL & 115022 = |
| (City), Florida 970 15m (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 complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position has registered agent. |
| Mille allaber |
| (Registered agent's signature) |
| 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: |
| Nena Albaker mbr |
| 7314 HONMOS DOMAT |
| APOILO BREACH FL 3357Z |
| 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. |
| Typed or printed name of signee |



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

NENA ALSAKER, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 1st day of January, 2015, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 27th day of March, 2017.

Elaine J. Marshall

Secretary of State

Certification# 100143868-1 Reference# 13669252-JRS Page: 1 of 1 Verify this certificate online at http://www.sosne.gov/verification