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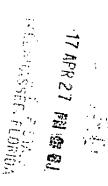
(Requestor's Name)
(Address)
· (Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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## **COVER LETTER**

SUBJECT: BLACK TOWER INVESTMENTS 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.
Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
The second secon
Please return all correspondence concerning this matter to the following:
SMAGL PEREZ
Name of Person
Firm/Company
12184 HATHERDEN CT.
Address
TACKSONVILLE, FL 32258  City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
· ·
ISHAEL PEREZ at (904) 699 2026
Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:  Division of Corporations  STREET ADDRESS:  Division of Corporations
Registration Section Registration Section
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, 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  Certificate of Status

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN FLUKIDA	
IN COMPILANCE 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. BLACK TOWER INVESTMENTS LLC (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. DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4. JAN 2016	
(Date first transacted business in Florida, if prior to registration.)	
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5	
12184 HATHERDEN CT JACKSONVILLE FL 32258 (Street Address of Principal Office)	
6	
SAME	
(Mailing Address)	
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Name: EDUARDO ANDRADE	
Office Address: 4424 HEAVEN TREES RD.	
TACKSOPVILLE, Florida 32207 (City), Florida (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 and	
accept the obligations of my position as registered agent.	
- Chill	
(Registered agent's signature)	
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
ISMAEL PEREZ, MANAGER, 12184 HATHERDEN CT. JACKSONVILLE, FL 32258 EDUARDO ANDRADE, HANAGER, 4424 HEAVEN TREES Pd. JACKSONVILLE, FL 322	ر در
CHOKKDE HADKADE, LANGER, AASA HEARED IKEET LOT THE KZONOWIECE	•
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.	

ISMAEL PEREZ

Typed or printed name of signee



April 5, 2017

ISMAEL PEREZ 12184 HATHERDEN CT JACKSONVILLE, FL 32258

SUBJECT: BLACK TOWER INVESTMENTS LLC

Ref. Number: W17000028918

We have received your document for BLACK TOWER INVESTMENTS LLC and your check(s) totaling \$130.00. However, the document has not been filed and is being retained in this office for the following:

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 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: 417A00006536

Page 1

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BLACK TOWER INVESTMENTS, 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 ANNUAL TAXES HAVE BEEN PAID TO DATE.



5820343 8300 SR# 20171953624 Authentication: 202251998

Date: 03-23-17

SR# 20171953624
You may verify this certificate online at corp. d.el, A. re.gov/authver.shtml