

MI7000003972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

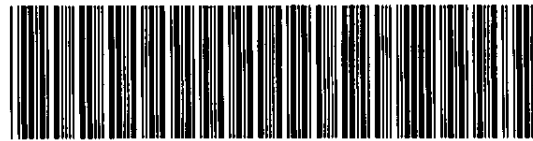
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W17-36048 RA Sign

Office Use Only



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04/25/17--01012--002 \*\*155.00

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2017 MAY -8 PM 2:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

2017 APR 24 AM 11:44

Office of the Secretary of State  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: KRI Belle Rive, 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:

**Gary L. Lieberman**

Name of Person

**Lieberman, Dvorin & Dowd, LLC**

Firm/Company

**30195 Chagrin Blvd., Suite 300**

Address

**Pepper Pike, Ohio 44124**

City/State and Zip Code

**gary@lddlegal.com**

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

For further information concerning this matter, please call:

**Gary L. Lieberman**

Name of Contact Person

at ( **216** )

Area Code

**292-7776**

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. **KRI Belle Rive, LLC**

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

2. **Ohio**

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

3. **82-0840045**

(FEF number, if applicable)

4. **Upon qualification**

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

5. **9821 Olde Eight Road, Suite F**

(Street Address of Principal Office)

**Northfield Center, Ohio 44067**

6. **9821 Olde Eight Road, Suite F**

(Mailing Address)

**Northfield Center, Ohio 44067**

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

Name: **InCorp Services, Inc.**

Office Address: **17888 67th Court North**

**Loxahatchee**

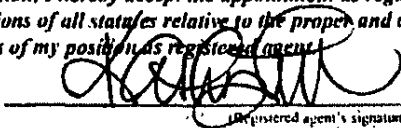
(City)

**Florida 33470**

(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.



**Kathy Shin on behalf of InCorp Services, Inc.**

(Registered agent's signature)

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

**Title or Capacity:**

**Name and Address:**

**Title or Capacity:**

**Name and Address:**

**Managing Member**

**Gary L. Lieberman**

**OE KRI Partners  
Belle Rive, LLC**

**38185 Chagrin Blvd., Suite 300  
Pepper Pike, Ohio 44124**

**Managing Member**

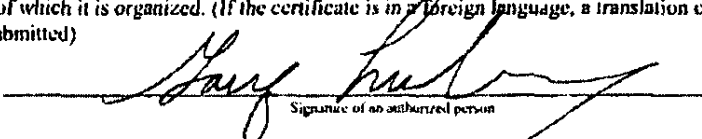
**Kenneth A. Gee**

**OE KRI Partners  
Belle Rive, LLC**

**9821 Olde Eight Road, Suite F  
Northfield Center, Ohio 44067**

(Use attachments if necessary)

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

10. 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.

**Gary L. Lieberman**

Typed or printed name of signer

FILED  
2011 MAY -8 PM 2:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

UNITED STATES OF AMERICA  
STATE OF OHIO  
OFFICE OF THE SECRETARY OF STATE

*I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show KRI BELLE RIVE LLC, an Ohio For Profit Limited Liability Company, Registration Number 3991272, was organized within the State of Ohio on February 13, 2017, is currently in FULL FORCE AND EFFECT upon the records of this office.*

FILED  
2017 MAY -8 PM 2:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



*Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 21st day of April, A.D. 2017.*

*Jon Husted*

Ohio Secretary of State

Validation Number: 201711102890



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 26, 2017

GARY L LIEBERMAN  
LIEBERMAN, DVORIN & DOWD, LLC  
30195 CHAGRIN BLVD., STE. 300  
PEPPER PIKE, OH 44124

SUBJECT: KRI BELLE RIVE, LLC  
Ref. Number: W17000036048

We have received your document for KRI BELLE RIVE, LLC and your check(s) totaling \$155.00. 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.

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.

Karen A Saly  
Regulatory Specialist II

Letter Number: 017A00008190

CEP  
2017 MAY -8 PM 4:42  
TALLAHASSEE, FLORIDA