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#### **COVER LETTER**

TO: Registration Section Division of Corporations				
Sheridan Court 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:				
Vladimir Nepustil				
Name of Person				
Sheridan Court LLC				
Firm/Company				
P.O. Box 540312				
Address				
Merritt Island, FL 32954				
City/State and Zip Code				
apmgtco@gmail.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Vladimir Nepustil 303 499-9243				
Name of Contact Person Area Code Daytime Telephone Number				
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration 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:  \$\B\$\$125.00 Filing Fee \times 130.00 Filing Fee \times 155.00 Filing Fee \times 155.00 Filing Fee \times 160.00 Filing Fee, Certificate of Status  Certificate of Status  Certified Copy  \$\$160.00 Filing Fee, Certificate of Status \times 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. Sheridan Court LL (Name of Forei	gn Limited Liability Company; must include "Limit	ted Liability Company," "L.L.C.," or "LLC."	)
(If name unavailable, enter alternal	e name adopted for the purpose of transacting business in F	Torida. The alternate name must include "Limited Lia	ability Company," "L.L.C," or "LLC.")
<sub>2.</sub> Colorado		<sub>3.</sub> 84-1558164	
(Jurisdiction under the law o	which foreign limited liability company is organized)		ber, if applicable)
4.			
••	(Date first transacted business in Florida, if prior t (See sections 605.0904 & 605.0905, F.S. to determ	to registration.) mine penalty liability)	<del></del>
5. 5801 North Atlant	ic Ave, #704	6. P.O. Box 540312	
(Street Address of Principal Office)		(Mailing Ad	
Cape Canaveral,	FL 32920	Merritt Island, FL 3295	4
7. Name and street add	ress of Florida registered agent: (P.O. Bo	x <u>NOT</u> acceptable)	
Name:	Janet Ellen Nepustil		
Office Address	5801 North Atlantic Ave, #704	<del></del>	
	Cape Canaveral	, Florida <u>32920</u>	
	(City)	(Zip co	de)
	isions of all statutes relative to the prope ons of my position as registered agent.  (Registered agent)		auties, and I am jamitiar with
8. The name, title or ca <u>Title or Capacity:</u>	spacity and address of the person(s) who hame and Address:	has/have authority to manage is/are: <u>Title or Capacity:</u>	Name and Address:
Manager	Vladimir Nepustil		
····	P.O. Box 540312		
	Merritt Island, FL 32954		
		<del>_</del>	
(Use attachments if nec	essary)		
	, and the second second		
	Mar	re of an authorized person	
	Signatur	re of an authorized person	_
10 This document is av	ecuted in accordance with section 605.020	03 (1) (b) Florida Statutes I am awa	re that any false information

Typed or printed name of signee

Vladimir Nepustil

## OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

### CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

SHERIDAN COURT, LLC

is a

Limited Liability Company

formed or registered on 08/14/2000 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20001157187.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 05/05/2017 that have been posted, and by documents delivered to this office electronically through 05/08/2017 @ 22:12:12.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 05/08/2017 @ 22:12:12 in accordance with applicable law. This certificate is assigned Confirmation Number 10231242 .



Wayner Williams

Secretary of State of the State of Colorado

\*\*\*\*\*\*\*\*\*\*\*End of Certificate\*\*\*\*\*\*\*\*\*\*

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."