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(Requestor's Name)					
(Address)					
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PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates of	Status			
Special Instructions to Filing Officer:					





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May 23, 2017

LAURA KOZELOUZEK 8200 NW 41ST STREET 2ND FL DORAL, FL 33166

SUBJECT: QUEST WORKSPACES DORAL, LLC

Ref. Number: W17000043961

We have received your document for QUEST WORKSPACES DORAL, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1055.00.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II Supervisor
Registration/Qualification Section

Letter Number: 417A00010374

COVER LETTER

то:	Registration Section Division of Corporations						
SUBJI	QUEST WORKSPACES DORAL, LLC						
Name of Limited Liability Company							
	closed "Application by Foreign Limited Liability Compice, and check are submitted to register the above reference,						
Please	return all correspondence concerning this matter to the	following:					
	LAURA KOZELOUZEK						
	N	ame of Person					
	QUEST WORKSPACES DORAL, LLC						
	Firm/Company						
	8200 NW 41ST STREET, SECOND FLOOR						
		Address					
	DORAL, FL 33166						
	City/State and Zip Code						
	laura@questworkspaces.com						
	E-mail address: (to be use	d for future annual	report notification)	 			
For fu	rther information concerning this matter, please call:						
	LAURA KOZELOUZEK	212 at (292-3802				
	Name of Contact Person	Area Code	Daytime Telephone 1	Vumber			
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		rcle			
Enclo	sed is a check for the following amount: \$\mathbb{\mathbb{G}}\$\$ \$125.00 Filing Fee \$\mathbb{\mathbb{G}}\$\$ Certificate of Status	S155.00 Filin Certified Copy	g Fee & \$\Bigcup \\$160.00 Fili of Status & Ce	ng Fee, Certificate rtified 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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: QUEST WORKSPACES DORAL, LLC

(If name unavailable, enter a Liability Company," "L.L.C,	Iternate name adopted for the purpose of transact " or "LLC.")	ing business in Florida. The alternate name	: must include "Limited
2. Delaware	, 46-	4319535	
	of which foreign limited liability	(FEI number, if applicable)	
4 12/13/2013	Document # L 1300017	12254)	
7	(Date first transacted business in Florida (See sections 605.0904 & 605.0905, F.S. 6	, if prior to registration.)	
5. 8200 NW 41ST STRE	ET, SECOND FLOOR	o determine penany natriny)	
DORAL, FL 33166		·	
	(Street Address of Principal Off	ice)	
6. 8200 NW 41ST STREE	ET, SECOND FLOOR		
DORAL, FL 33166		-	
	(Mailing Address)		
7 Name and street address	s of Florida registered agent: (P.O. Box NO	OT accentable)	
	ROY GLASSBERG	21_deceptable)	
Name:			
Office Address:	6971 North Federal Highway, Suite 201		
	Boca Raton	, Florida <u>33487</u>	E 3
Registered agent's accept	(City)	(Zip code)	Б С ≥
Having been named as req designated in this applicat to complywith the provision	gistered agent and to accept service of procion, I hereby accept the appointment as rejuns of all statutes relative to the proper and my position as registered agent.	gistered agent and agree to act in this	capacity of further Peree
	(Registered agent's	signature)	R A
8. The name, title or capa	city and address of the person(s) who has/ha	ve authority to manage is/are:	
LAURA KOZELOUZEK,	MANAGER		
8200 NW 41ST STREET,	SECOND FLOOR		
DORAL, FL 33166			
	of existence, no more than 90 days old, duly of which it is organized. (If the certificate is bimitted)	•	-
	Signature of an authori	zed person	
	in accordance with section 605.0203 (1) (b), the Department of State constitutes a third d		

LAURA KOZELOUZEK

Typed or printed name of signee

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "QUEST WORKSPACES DORAL, 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-FIRST DAY OF APRIL, A.D. 2017.

TO STATE OF THE PARTY OF THE PA

Authentication: 202414578

Date: 04-21-17

AUTHORIZATION LETTER

In connection with the conversion of QUEST WORKSPACES DORAL, LLC, a Florida limited liability company (the "FL Company") into QUEST WORKSPACES DORAL, LLC, a Delaware limited liability company (the "DE Company"), the FL Company hereby authorizes the DE Company to use its name in the State of Florida, including, without limitation, the filing of an Application by Foreign Limited Liability Company to Transact Business in Florida.

QUEST WORKSPACES DORAL, LLC, a Florida limited liability company

April 26, 2017

By:

Laura Kozelouzek, Member and Manager