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ARAZOZA & FERNANDEZ

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7/6/2017

Division of Corporations

Florida Department of State
Division of Corporations
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(((H17000176701 3)))



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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : ARAZOZA & FERNANDEZ-FRAGA P.A.
Account Number : 876624003440
Phone : (305)444-6226
Fax Number : (305)442-4829

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Foreign Limited Liability Company
ALESSANDRIA LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

June 30, 2017

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

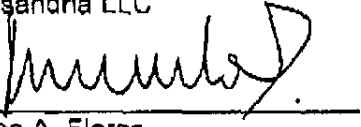
Ref: **Alessandria LLC**
Document Number L17000135181
Date Filed: 06/21/2017

Dear Sir/Madam

1. The undersigned is the Authorized Member (AMBR) of Alessandria LLC, a Florida corporation, filed with the Florida Department of State on 06/21/2017 under Document Number L17000135181.
2. The undersigned hereby consents to and authorizes the use of the name ALESSANDRIA LLC for the purpose of filing an Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida on behalf of Alessandria LLC, a South Dakota limited liability company.
3. The undersigned has personal knowledge of the facts and matters set forth herein and therefore has no intentions of reinstating the Dissolved entity.

Sincerely yours,

Alessandria LLC

By: 
Marco A. Flores
AMGR

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ALESSANDRIA 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:

LAURA KOHN

Name of Person

ARAZOZA & FERNANDEZ-FRAGA P.A.

Firm/Company

2100 SALZEDO STREET, SUITE 300

Address

CORAL GABLES, FL 33134

City/State and Zip Code

LAURA@ARAZOZA.COM

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

For further information concerning this matter, please call:

LAURA KOHN

305

444-6226 X 233

Name of Contact Person

At ()

Area Code

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

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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. ALESSANDRIA 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. STATE OF SOUTH DAKOTA

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

3.

(FBI number, if applicable)

4. DATE OF FILING WITH THE FLORIDA DEPARTMENT OF STATE

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

5. 9573 SW 125 TERRACE

(Street Address of Principal Office)

MIAMI, FL 33176

6. 9573 SW 125 TERRACE

(Mailing Address)

MIAMI, FL 33176

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

Name: ARAZOZA & FERNANDEZ-FRAGA P.A.

Office Address: 2100 SALZEDO STREET, SUITE 300

CORAL GABLES

(City)

Florida 33134

(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.

(Registered agent 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:

MANAGER

MARCO A FLORES

9573 SW 125 TERRACE

MIAMI, FL 33176

PRESIDENT

MARCO A. FLORES

9573 SW 125 TERRACE

MIAMI, FL 33176

(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)

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.

Signature of an authorized person

MARCO A. FLORES, MANAGER

Typed or printed name of signer

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2017 JUL -6 PM 5:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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State of South Dakota

Office of the Secretary of State

Certificate of Good Standing

Domestic Limited Liability Company

I, **Shantel Krebs**, Secretary of State of the State of South Dakota, hereby certify that

ALESSANDRIA LLC

Business ID: DL133302

was authorized to transact business in this state on: May 9, 2017.

I, further certify that **ALESSANDRIA LLC** has complied with the laws of this State relative to the formation of Certificate of Good Standing/Authorizations of its kind and is now regularly and properly organized and existing under the laws of this State and is in Good Standing, as shown by the records of this office. This certificate is not to be construed as an endorsement, recommendation or notice of approval of its financial condition or business activities and practices. Such information is not available from this office.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of South Dakota, in Pierre, the Capital City, this day, June 30, 2017.

Shantel Krebs

Shantel Krebs
Secretary of State

06/30/2017 4:30 PM

Verification #: 009680222

2017 JUL - 6 PM 5:19
TALLAHASSEE, FLORIDA
SECRETARY OF STATE