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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

JUL 13 2017  
J. HARRIS

6625-111M

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Keriell Trans Group 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:

Maribel Rivera

\_\_\_\_\_  
Name of Person

Keriell Trans Group LLC

\_\_\_\_\_  
Firm/Company

105 Prairie Falcon Dr.

\_\_\_\_\_  
Address

Groveland, FL 34736

\_\_\_\_\_  
City/State and Zip Code

kerielltransgroup@gmail.com

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

For further information concerning this matter, please call:

Maribel Rivera

407

913-2813

\_\_\_\_\_  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 28, 2017

MARIBEL RIVERA  
105 PRAIRIE FALCON DR  
GROVELAND, FL 34736

SUBJECT: KERIEL TRANS GROUP LLC  
Ref. Number: W17000053797

FILED  
2017 JUL 11 PM 4:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for KERIEL TRANS GROUP LLC and your check(s) totaling \$160.00. 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.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 717A00013103

FILED  
2017 JUL 11 PM 12:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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. Keriel Trans Group 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)
3. 82-1887565  
(FEI number, if applicable)
4. None  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 105 Prairie Falcon Dr.  
(Street Address of Principal Office)  
Groveland, FL 34736
6. 105 Prairie Falcon Dr.  
(Mailing Address)  
Groveland, FL 34736

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

Name: Maribel Rivera

Office Address: 105 Prairie Falcon, Dr.  
Groveland, Florida 34736  
(City) (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.*

Maribel Rivera

(Registered agent's signature)

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

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Manager</u>	<u>Kervin Velazquez</u> <u>105 Prairie Falcon Dr.</u> <u>Groveland, FL 34736</u>		
<u>Owner</u>	<u>Maribel Rivera</u> <u>105 Prairie Falcon Dr.</u> <u>Groveland, FL 34736</u>		

(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.

Maribel Rivera

Signature of an authorized person

Maribel Rivera

Typed or printed name of signee

FILED  
2011 JUL 11 PM 4:10  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KERIEL TRANS GROUP 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 NINETEENTH DAY OF JUNE, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KERIEL TRANS GROUP LLC" WAS FORMED ON THE SIXTEENTH DAY OF JUNE, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



6447272 8300

SR# 20174813488

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202729877

Date: 06-19-17