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PICK-UP	MAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	Certificates	of Status				
Special Instructions to F	iling Officer:	GYU				

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07/05/17-01018--002 **160.00

17 JUL 17 PM F- 47

S. WARREN JUL 1 9 2017



July 12, 2017

SAM OSBORNE 770 N. LASALLE DRIVE, SUITE 700 CHICAGO, IL 60654

SUBJECT: TRIEU FLORIDA, LLC Ref. Number: W17000057642

We have received your document for TRIEU FLORIDA, 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Stacey M Warren Regulatory Specialist II

Letter Number: 917A00014089

COVER LETTER

TO:

Registration Section

	u, LLC ———					
		Name of	Limited Liability (Company		
The enclosed "Ap Existence, and che	plication by For eck are submitte	eign Limited Liability Comp d to register the above refer	oany for Authoriza enced foreign limi	ition to Tra ted liability	insact Business in Florida," Cer y company to transact business	tificate of in Florida
Please return all c	orrespondence o	concerning this matter to the	following:			
	Sam Osborne					
		N	ame of Person			
	Atom Law Gro	up, LLC				
		F	irm/Company			
	770 N. LaSalle	Drive, Suite 700				
			Address	•		
	Chicago, IL 60	654				
		City/S	tate and Zip Code			
s	osborne@atom.	law				
_		E-mail address: (to be use	d for future annual	report not	ification)	•
For further inform	nation concernin	g this matter, please call:				
Sam Osl	oorne		312 at (943-800	00	
	Name o	of Contact Person	Area Code	Day	time Telephone Number	
Division Registrat P.O. Box	of Corporations ion Section 6327 see, FL 32314			Division (Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301	
Enclosed is a chec	ck for the follow 90 Filing Fee	ring amount: \$\text{\text{\$\ext{\$\text{\$\}}}}}\$}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}	☐ \$155.00 Filir Certified Copy	ng Fee &	■ \$160.00 Filing Fee, Certifi of Status & Certified Copy	cate

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLANCE WITH SECTION 6050602, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

COMPANYTO IRANSACTBO	SINESS IN THE STATE OF FLORIDA:		
Litrieu, ELC	Limited Liability Company; must include "Lim	olad Lephility Company "I J C " or " [C	<u> </u>
(Name of Foreign) Trien Florida, LLC	Limited Lianuty Company, must menue Tim	med Chaomy Company, 1997 Common	,
(It name unavailable, enter alternate na	une adopted for the purpose of transacting business in	Florida. The alternate name must include *Limited 8	anhelity Company, ""L.I. C;" or [1.1.C;")
, Tennessee		3, 26-1814685	
(Jurisdiction under the law of wh	nch foreign hunted liability company is organized)	()-Et no	auber, if applicable)
1 Date of registration			
4. Talle to Teginian	(Date first transacted business in Florida, if prior (See sections 605 0904 & 605,0905, F.S. to dete	to registration [
. 301 N. University Dri			<u>'</u>
5. 3301 N. University Dri	Principal Office)	6. 3301 N. University Drive	ikliess)
Suite 420		Suite 420	
Coral Springs, FL 3306	55	Coral Springs, FL 33065	
7. Name and street address Name:	SS of Florida registered agent: (P.O. B Kenny Tran		FILE 7 JUL 17 1
Office Address:	3301 N. University Drive, Suite 420		2 –
	Coral Springs	, Florida <u>33065</u>	<u> </u>
to comply with the provis	ntion, I hereby accept the appointmen ions of all statutes relative to the propis of my position as registered agent. (Registered agent	per upd complete performance of m	y duties, and I am familiar with
		•	
8. The name, title or cap <u>Title or Capacity:</u>	acity and address of the person(s) who Name and Address:	has/have authority to manage is/are <u>Title or Capacity:</u>	: Name and Address:
President	Tony Trieu		
	3301 N. University Dr., #4 Coral Springs, F1, 33065	20	
(Use attachments if neces	ssary)		
9. Attached is a certificate	e of existence, no more than 90 days of of which it is organized. (If the certifi	ld, duly authenticated by the official cate is in a foreign language, a trans	having custody of records in the lation of the certificate under oath
10. This document is executed submitted in a document to	cuted in accordance with section 605.0 o the Department of State constitutes a	203 (1) (b), Florida Statutes. I am av third degree felony as provided for	vare that any false information in s.817.155, F.S.
	Nigna	ture of an authorized person	

Typed or printed name of signee

Tony Trieu



Division of Business Services **Department of State**

State of Tennessee

312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

SAM OSBORNE

June 20, 2017

SUITE 700 770 N. LASALLE DRIVE CHICAGO, IL 60654

Request Type: Certificate of Existence/Authorization

Issuance Date: 06/20/2017

Request #:

0241858

Copies Requested:

Document Receipt

Receipt #: 003436349

Filing Fee:

\$20.00

Payment-Credit Card - State Payment Center - CC #: 3704866208

\$20.00

Regarding:

TRIEU, LLC

Filing Type:

Limited Liability Company - Domestic

Control #:

552232

Formation/Qualification Date: 06/26/2007

Date Formed:

06/26/2007

Status:

Active Perpetual

Formation Locale: TENNESSEE

Duration Term:

Inactive Date:

Business County:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

TRIEU, LLC

- * is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Processed By: Cert Web User

Verification #: 022973937