

117000006234

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200301591882

07/20/17--01017--001 **125.00

FILED
2017 JUL 20 AM 8:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
JUL 25 2017

COVER LETTER

**TO: Registration Section
 Division of Corporations**

SUBJECT: DNA 10893 Management, 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:

Deepak Nair

Name of Person

Firm/Company

4958 Peregrine Point Way

Address

Sarasota, FL 34231

City/State and Zip Code

dnairmd@gmail.com

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

For further information concerning this matter, please call:

Mika Hillery at Legally Mine

Name of Contact Person

at (800)

Area Code

375-2453

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

**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. DNA 10893 Management, 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. Alaska 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 1231 W. Northern Lights Blvd. #911 6. 4958 Peregrine Point Way
(Street Address of Principal Office) (Mailing Address)
Anchorage, AK 99503 Sarasota, FL 34231

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

Name: Deepak Nair
Office Address: 4958 Peregrine Point Way
Sarasota, Florida 34231
(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.

Deepak Nair
(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>Member</u>	<u>Deepak Nair</u> <u>4958 Peregrine Point Way</u> <u>Sarasota, FL 34231</u>	_____	_____
<u>Member</u>	<u>Alka Nair</u> <u>4958 Peregrine Point Way</u> <u>Sarasota, FL 34231</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)

Deepak Nair
(Signature of an authorized person)

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.

Deepak Nair
Typed or printed name of signer

FILED
2011 JUL 20 AM 8:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Alaska Entity #10061587

State of Alaska
Department of Commerce, Community, and Economic
Development
Corporations, Business, and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

DNA 10893 Management, LLC

This entity was formed on June 19, 2017 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective June 19, 2017.



Chris Hladick
Commissioner

2017 JUL 20 AM 8:06
F-1
SECRETARY OF STATE
TALLAHASSEE, FLORIDA