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SECRETARY OF STATE
ALLAHASSEE ELORINA

July

COVER LETTER

TO:

Registration Section

Division of Corporations				
SUBJECT: Woodbine 240 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:				
Alexander Doulames Name of Person				
Rockport Self Storage Firm/Company				
41085 Elm Street Address				
Murricta, CH 92562 City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Alexander Doulaines at (951) 348 - 8810 Name of Contact Person Area Code Daytime Telephone Number				
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301				
Enclosed is a check for the following amount: \$\sum_{\text{S}}\$125.00 Filing Fee \sum_{\text{Certificate}} \sum_{\text{S}}\$130.00 Filing Fee & \text{Certificate} \sum_{\text{S}}\$155.00 Filing Fee & \sum_{\text{S}}\$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 SEC COMPANYTO TRANSACT B	CHON 605.0902, FLORIDA STATUTES, THE L USINESS IN THE STATE OF FLORIDA:	OLLOWING IS SUBMITTED TO REGI	STER A FOREIGN LIMITED LIABILITY
I. Wood (Name of Foreign	bine 240, LLC a Limited Liability Company; must include "Limit	ed Liability Company," "L.L.C.," or "LLC	")
	name adopted for the purpose of transacting business in Fi		
2. State of (Jurisdiction under the law of w	hich foreign limited liability company is organized)	3. 82-2230 (FEI ma	2534
4. None	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration.)	
5. Woodbine.	240, LLC. Principal (Mice)		240, LLC.
SO N. Gould	1 St. Suite 6701 14 82801	30 N Gould Sheridan	240, LLC. St. Suite 6701 WY 82801
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)	SECTION SECTION
Name:	Steven Doular	nes	E THE SAME
Office Address:	5515 Woodbine Pace (City)	Rd.	26 26 88 99
	Pace	, Florida _325	FLORE CO
Having been named as re designated in this applica- to comply with the provisi	gistered agent and to accept service of parties, and the proposition of all statutes relative to the proper of my position as registered agent.	process for the above stated limite s registered agent and agree to ac and complete performance of my	d liability company at the place
0.71	(Registered agent's :	,	
Tine or Capacity;	city and address of the person(s) who ha Name and Address:	s/have authority to manage is/are: Title or Capacity:	Name and Address:
Manager_	Steve Doulames 5515 Locabine Rd Pace, FL 32571	···	
			
Use attachments if necess	ary)		
Attached is a certificate our solution and the law of the translator must be sulf the translator must be sulfit to the translator must be sufficient to the translator must be suffi	of existence, no more than 90 days old, d f which it is organized. (If the certificate omitted)	luly authenticated by the official hat is in a foreign language, a translat	iving custody of records in the ion of the certificate under oath
0. This document is execu- ubmitted in a document to	ted in accordance with section 605,0203 the Department of State constitutes a thir	(1) (b), Florida Statutes, I am awar d degree felony as provided for in :	e that any false information s.817.155, F.S.
-	16/19/	2	
		f an authorized person	
-	Steven Doular Typed or p	nes	

STATE OF WYOMING Office of the Secretary of State

I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Woodbine 240 LLC

is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **July 10, 2017**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2017-000760823**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 21st day of July, 2017 at 1:02 PM. This certificate is assigned 023661321.



Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.