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FLORIDA DEPARTMENT OF STATE **Division of Corporations**

October 13, 2017

KIRA R LOPEZ 501 GOLDEN ISLES DR SUITE 101 HALLANDALE BEACH, FL 33009

SUBJECT: HIJI LLC

Ref. Number: W17000081702

We have received your document for HIJI 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.

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 Stäte, 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 vour filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijeaux Regulatory Specialist

Letter Number: 317A00020731

Corrected. Think you Love 2

COVER LETTER

то:		ation Section of Corporations		·			1		
eren ti	НЦ	HIJI LLC, a Delaware limited liability company							
SUBJE	.CI:	Name of Limited Liability Company							
The en- Exister	closed "A _l ace, and cl	pplication by Foreigneck are submitted t	gn Limited Liability Compar o register the above reference	ny for Authorizationsed foreign limited	on to Transact Busine Hiability company to	ess in Florida." (o transact busine	Certificate o		
Please	return all	correspondence cor	ncerning this matter to the fo	llowing:					
		Kira R. Lopez					ļ		
	Name of Person Adelson Law Firm								
		Firm/Company							
501 Golden Isles Drive, Suite 101									
		Address							
Hallandale Beach, FL 33009									
		City/State and Zip Code							
		E-mail address: (to be used for future annual report notification)							
For fu	irther info	rmation concerning	this matter, please call:			ZETT KOY	71		
	Kira R. Lopez		954 _ at (458-9238 _)	- SSE - 1				
	<u> </u>	Name of	Contact Person	Area Code	Daytime Telep	- >			
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301						
Enclo		heck for the followi 25.00 Filing Fee	ing amount: \$\Bigsim \\$130.00 \text{ Filing Fee & Certificate of Status}\$	S155.00 Filir Certified Copy	ng Fee & 🛛 \$160. of Statu	.00 Filing Fee. C s & Certified Co	 		

APPLICATION BY FOR	REIGN LIMITED LIABILITY C IN	OMPANY FLORIDA	FOR AUTHORIZATION TO	TRANSACT BUSINESS
IN COMPLIANCE WITH SECTOOMPANY TO TRANSACT BUS	ION 605.0X02, FLORIDA STATUTES, TH INESS IN THE STATE OF FLORIDA:	E FOLLOWI!	NG IS SUBMITTED TO REGISTER.	A FOREIGN LIMITED LIABILITY
1. HIJI LLC (Name of Foreign U	imited Liability Company; must include "Li	mited Liebility	Company," "LLC" or "LLC.")	
HUI 219 LLC				- C
	ne adopted for the purpose of transacting business i	n Florida, The al	ternade manie musi tochude "Lumiteo Lanonii)	Company. Lize, or Lac. 7
2. Delaware (Jurisdiction soder the law of whi	ch foreign limited liability company is organized)	_ 3.	82-1979675 (FEI number.)	(applicable)
4	(Date last transacted business in Florida, if pri (See sections 605.0904 & 605.0905, F.S. to de			_
s c/o: Accountant & Man		6.	c/o: Accountant & Managemi	net
(Street Address of Pr 14311 Biscayne Blvd #	•		14311 Biscayne Blvd #4474	1
			North Miami, FL 33161	
North Miami, FL 33161			110101111111111111111111111111111111111	
7. Name and street addres	of Florida registered agent: (P.O.	Box <u>NOT</u>	ncceptable)	
Name:	Robes 29 LLC			
Office Address:	14311 Biscayne Blvd #4474			
	North Miami		, Florida 33161 (Zio code)	
designated in this applica	gistered agent and to accept service tion, I hereby accept the appointme ons of all statistes relative to the pr s of my position as registered agent X	ent as regist oper and co	ered avent and agree to act in	tuis capacity. I juitines agree
	(Registered a	ರ್ಷಗೃ ಕ ಪ್ರಶುಣ್ಯವು		1
8. The name, title or cap: Title or Capacity:	ecity and address of the person(s) w	ho has/bave	authority to manage is/are:	Name and Address:
Manager	Robea 219 LLC		,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
MINITER	14311 Biscayne Blyd #4	474		
	North Miami, FL 33161		ÄHA5	# 11
			S S S	
	_			
				-
(Use attachments if neces			*,	22
jurisdiction under the law of the translator must be s	cuted in accordance with section 605 the Department of State constitute	iificate is in 5.0203 (1) (1	a foreign language, a translation), Florida Statutes. I am aware gree felony as provided for in a	ring custody of records in the on of the certificate under oath the certificate under oath that any false information
	Victor Persia			

Typed or printed name of signer

Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HIJI 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 THIRD DAY OF OCTOBER, A.D. 2017.

6454431 8300

SR# 20176454972 You may verify this certificate online at corp.delaware.gov/authver.shtml Jettrey VI Bullings, Secretary of State

Authentication: 203336762

Date: 10-03-17