

MI7000010028

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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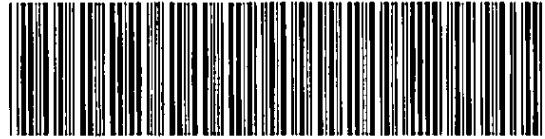
(Business Entity Name)

(Document Number)

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Y. SULKER

COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: MOORE PROPERTIES 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:

Robert P Moore  
Name of Person

MOORE PROPERTIES LLC  
Firm/Company

92967 KANEHOA Loop  
Address

Kapolei, HI 96707  
City/State and Zip Code

moorepropertieshi@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert P Moore at (808) 223 9991  
Name of Contact Person 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

(I am 5 hours  
behind you in  
time, call  
after 2 PM FL  
time)

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. MOORE PROPERTIES LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
2. MOORE PROPERTIES OF HAWAII 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.")
3. HAWAII  
(Jurisdiction under the law of which foreign limited liability company is organized)
4. 47-3941693  
(FEI number, if applicable)
5. 92-967 KANEHOA LOOP  
(Street Address of Principal Office)  
KAPOLEI, HI 96707
6. \_\_\_\_\_  
(Mailing Address)


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

Name: CHRISTOPHER P. MOORE

Office Address: 13163 72<sup>ND</sup> TERRACE PLACE  
SEMINOLE, Florida 33776  
(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 designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar and accept the obligations of my position as registered agent.

  
(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 MANAGER</u>	<u>ROBERT P MOORE</u> <u>92-967 KANEHOA LOOP</u> <u>KAPOLEI, HI 96707</u>	<u>MEMBER</u>	<u>HENRY MED</u> <u>10202 CHARLOTTE</u> <u>TAMPA, FL 33613</u>
<u>MEMBER</u>	<u>CHRISTOPHER P. MOORE</u> <u>13163 72<sup>ND</sup> TERRACE PL</u> <u>SEMINOLE, FL 33776</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 jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate and 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.

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. MOORE PROPERTIES LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
2. MOORE PROPERTIES OF HAWAII 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.")
3. Hawaii  
(Jurisdiction under the law of which foreign limited liability company is organized)
4. 47-3941693  
(FEI number, if applicable)
5. 92-967 KANEHOA LOOP  
(Street Address of Principal Office)
6. 92-967 K  
(Mailing Address)
7. KAPOLEI, HI 96707

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

Name: Christopher P. Moore

Office Address: 13163 72<sup>ND</sup> TERRACE PLACE  
Seminole, Florida 33776  
(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.

(Registered agent's signature)

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

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
<u>MEMBER-MANAGER</u>	<u>ROBERT P MOORE</u> <u>92-967 KANEHOA LOOP</u> <u>KAPOLEI, HI 96707</u>	<u>MEMBER</u>	<u>IDENTHER MEDINA</u> <u>10207 CHARLESTON CORNER RD</u> <u>TAMPA, FL 33635</u>
<u>MEMBER</u>	<u>CHRISTOPHER P. MOORE</u> <u>13163 72<sup>ND</sup> TERRACE PL</u> <u>SEMINOLE, FL 33776</u>		

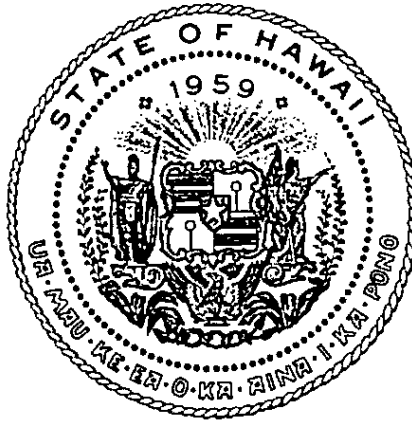
(Use attachments if necessary)

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.

Signature of an authorized person

Typed or printed name of signee



## Department of Commerce and Consumer Affairs

### CERTIFICATE OF GOOD STANDING

I, the undersigned Director of Commerce and Consumer Affairs of the State of Hawaii, do hereby certify that according to the records of this Department,

**MOORE PROPERTIES LLC**

was organized under the laws of the State of Hawaii on 05/03/2015 ;  
that it is an existing limited liability company in good standing  
and is duly authorized to transact business.

IN WITNESS WHEREOF, I have hereunto set  
my hand and affixed the seal of the  
Department of Commerce and Consumer  
Affairs, at Honolulu, Hawaii.

Dated: November 20, 2017

Director of Commerce and Consumer Affairs

