## M170000/1006

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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## **COVER LETTER**

. . . .

TO: Registration Sec Division of Corp	ction porations					
SUBJECT:	NEAR I	AST L.L	C.			
	Name of	Limited Liability Company				
			ansact Business in Florida," Certificate of y company to transact business in Florida.			
Please return all correspor	ndence concerning this matter to the	e following:				
	HAILAN	JORULMAZ Vame of Person				
	P	Name of Person				
	NEAR	EAST LL	- C			
	- · · ·	Firm/Company				
2	1621 N. FEDERI	AL HWY. C	INIT: V			
<del>- '</del>	" -	Address				
	BOCA RATON City!	, FL 3	3 43/			
	City/S	State and Zip Code				
	hakanyorulma E-mail address: (to be uso	210 aol.com				
	E-mail address: (to be use	ed for future annual report no	tification)			
For further information co	ncerning this matter, please call:					
HAKAN	YORUL MA2 Name of Contact Person	at (20/) 90	60 - 5260			
	Name of Comact Person	Area code Day	Anne rereptione Number			
MAILING ADDRESS:  Division of Corporations  STREET ADDRESS:  Division of Corporations						
Registration Sect		Registration Section				
P.O. Box 6327	1371.4	Clifton Building				
Tallahassee, FL 3	9231 <del>4</del>	2661 Executive Center Circle Tallahassee, FL 32301				
inclosed is a check for the	e following amount:					
□ \$125.00 Filing		☐ \$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 COMPANY TO TRANSACT BUSINE	605.0902, FLORIDA STATUTES, THE FO SS'INTHE STATE OF FLORIDA:	OLLOWING IS SUBMITTED TO	O REGISTER A FORE	IGN LIMITED LIABILITY
1(Name of Foreign Limit	EAR FAST ed Liability Company; must include "Limited	L.L.C., d Liability Company," "L.L.C.," o	or "LJ.C.")	
(If name unavailable, enter alternate name ad	opted for the purpose of transacting business in Flor	rida. The alternate name most include "	Limited Liability Company	." "I_I_C," or "I.I C.")
2. DELAW / (Jurisdiction under the law of which for	4/2 E reign limited liability company is organized)	3.	(FEI number, if applicable	2)
4.	Date first transacted business in Florida, if prior to See sections 605.0904 & 605.0905, F.S. to determi	registration.) ne penalty liability)		
5. 2621 N. Feb (Street Address of Princips		6. 2621 1	11. FEDERAL Mailing Address)	Hwy
BOCA RATON	FL 33431	BOCA RA	TON FL	33431
7. Name and street address of	Florida registered agent: (P.O. Box	NOT acceptable)		
Name:	HAKAN YORULINA	2		
Office Address:	2621 N. FEDERAL P.	HWY LINIT: V		
	BOCA RATON (City)	, Florida <u> </u>	33431 (Zip code)	
to comply with the provisions of and accept the obligations of a	I hereby accept the appointment as of all statutes relative to the proper my position as registered agent.  (Registered agent)	and complete performance	e of my duties, and	
8. The name, title or capacity <u>Title or Capacity:</u>	and address of the person(s) who ha  Name and Address:	Title or Capacity:	Name a	ndæddress:
OWNER	HAVAN YORUCMA. 2621 N. Federal H.	2		
	BOCA RATUAL FLS.	343/		
<del></del>		<del> </del>	·	
Use attachments if necessary)		-		
	vistence, no more than 90 days old, on the certificate (If the certificate (tted))		——————————————————————————————————————	•
	in accordance with section 605.0206 Department of State constitutes a Uni			
<del></del> -	Signiff	of an authorized person		
	Typed or	YOR ULMAZ printed name of signee		

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "NEAR EAST 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 TWENTIETH DAY OF DECEMBER, A.D. 2017.

Authentication: 203804018

Date: 12-20-17