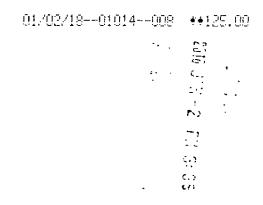
## M18000000063

| (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: |  |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |
|   |  |  |  |  |  |





900307189869



JAN 03 7019 J. HARRIS

## COVER LETTER

. .

|  | ation Section<br>n of Corporation  | ıs  |   |  |  |  |
|--|--|---|---|--|--|--|
| SUBJECT:   | Port foli  | o Builders L  | imited 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  | Please return all correspondence concerning this matter to the following:      |   |   |  |  |  |
|  |  | Gerardo R   | omaguera                                    |  |  |  |
|  | _  | 140   |   |  |  |  |
| Portfolio Builders LLC   |  |   |   |  |  |  |
|  |  |   |   |  |  |  |
|  | 642  | 5 Miamil  | akes Dr E                                   | # 477  |  |  |
|  |  |   |   |  |  |  |
| Miani Laker FL 33014<br>Cily/State and Zip Code  |  |   |   |  |  |  |
| City/State and Zip Code  |  |   |   |  |  |  |
| Jerry & Kepartners IIc. Com E-ntail address: (to be used for future annual report notification)  |  |   |   |  |  |  |
|  |  |   |   |  |  |  |
|  |  | g this matter, please call:                                 |   |  |  |  |
| Ger  | rardo K  | OMAGUETA<br>TContact Person                                 | at ( <u>766</u> ) <u>28</u><br>Area Code Da | aytime Telephone Number  |  |  |
| Divisior<br>Registra<br>P.O. Bo  | NG ADDRESS:<br>n of Corporations<br>ation Section<br>ex 6327<br>ssee, FL 32314 |   | Divisio<br>Registra<br>Clifton<br>2661 E:   | CT ADDRESS: n of Corporations ation Section Building xecutive Center Circle ssee, FL 32301 |  |  |
| Enclosed is a che ☐ \$125  | eck for the follow<br>.00 Filing Fee   | ing amount:  ☐ \$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

|  | TION 605.0902, FLORIDA STATUTES, THE<br>LISINESS IN THE STATE OF FLORIDA:                            | FOLLOWING IS SUBMITTED TO REG         | ISTER A FOREIGN LIMITED LIABILITY  |
|--|--|---------------------------------------|--|
| $\sim$ .                                     | Folio Builders   | 1 6                                   |  |
| (Name of Foreign                             | Limited Liability Company; must include Lim  |                                       | <u></u>  |
|  | olio Builders DE   |                                       | P195 0 901 29 01 09  |
| $\sim$ 1                                     |  |                                       | manning Company, Tallet, or tales, )   |
| 2. DETE WG. (Jurisdiction under the law of w | √ € thich foreign limited liability company is organized)  | 3                                     | umber, if applicable)  |
| . Decem                                      | nber 28, 2017  |                                       |  |
| +,   | (Date first transacted business in Florida, if prior (See sections 605,0904 & 605,0905, F.S. to dete | to registration.)                     |  |
| = 101075 Mian                                | ni Lakes Dr E #47  | 7                                     | r.n  |
| (Street Address of)                          | Principal Office)  | (Mailing /                            | Address)   |
| Miami Lok                                    | (P) F-L  |                                       | <u></u>  |
|  | 37019  |                                       | · · · · · · · · · · · · · · · · · · ·  |
| <b>7</b>                                     | 201 (1 / 1 A A A   | Nom                                   | <i>№</i> .   |
| 7. Name and street addres                    | ss of Florida registered agent; (P.O. Bo   |                                       | ** <b>*</b>  |
| Name:  | Gerardo Komac  | Juers ,                               | (.)  |
| Office Address:                              | 6625 Miami Lakes<br>Miami Lakes  | ces Dr + #477                         | ୍ଥ <u>କ</u>  |
|  | Miami Lakes  | 33(                                   | 14   |
|  | (City)   | 、Florida <u>ファ</u><br>(Zip            | vode)  |
| Registered agent's accep                     |  | Construction of the Europe AP 1       | and the state of t |
|  | gistered agent and to accept service of<br>tion, I hereby accept the appointment                     |                                       |  |
| to comply with the provis-                   | ions of all statutes relative to the prop  |                                       |  |
| and accept the obligation                    | s of my position as registered agent.  |                                       |  |
|  |  | <u> </u>                              |  |
|  | (Registered agent  | ( x rightiture)                       |  |
|  | acity and address of the person(s) who   |                                       |  |
| Title or Capacity:                           | Name and Address:  | Title or Capacity:                    | Name and Address:  |
| Member                                       | Gerardo Romago<br>6025 Miami Laker   | Dr. Hunn                              | ·  |
|  | Miani Laker FL   | 12 HY 7 1<br>33 WY                    |  |
|  | / _  |                                       |  |
|  |  |                                       |  |
|  |  | <u> </u>                              |  |
| (Use attachments if neces                    | sary)  |                                       |  |
| 9 Attached is a cortificate                  | of existence, no more than 90 days old   | duly authenticated by the official    | having custody of records in the   |
|  | of which it is organized. (If the certific   |                                       |  |
| of the translator must be si                 | ubmitted)  |                                       |  |
| 10. This document is exec                    | uted in accordance with section #05.02   | 93 (1) (b), Florida Statutes. I am av | vare that any false information  |
| submitted in a document to                   | the Department of State onstitutes a   | third degree felony as provided for   | in s.817.155, F.S.   |
|  |  |                                       |  |
|  | Signatu  | ure of an authorized person           | <del></del> _  |
|  | Gerardo Romag.   |                                       |  |
|  | Topod Comagu   | or printed name of signee             | <del></del>  |

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "PORTFOLIO BUILDERS 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 EIGHTEENTH DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PORTFOLIO"
BUILDERS LLC" WAS FORMED ON THE FIFTH DAY OF SEPTEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 203420330

Date: 10-18-17

6533746 8300 SR# 20176681156