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2016-01-09 14:31:07

2127-235-3 From: Kimberly L. Shrey

1/9/2018

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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Foreign Limited Liability Company

TOTTS, LLC

Certificate of Status	0
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Estimated Charge	\$125.00

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Totts, 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:

Stefania Pialis
Name of Person
Beermann Pritikin Mirabelli-Swerdlow LLP
Firm/Company
161 North Clark Street, Suite 2600
Address
Chicago, Illinois 60601
City/State and Zip Code
spialis@beermannlaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stefania Pialis at (312) 621-9700
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

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

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DIVISION OF STATE

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. Tottis, L.L.C.
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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.")

2. Delaware
(The jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FBI number, if applicable)

4. _____
(Note that transacted business in Florida, if prior to registration.
(See sections 605.0901 & 605.0903, F.S., to determine penalty liability.)

5. 5300 Broken Sound Blvd., NW #110
(Street Address of Principal Office)
Boca Raton, Florida 33487

6. 5300 Broken Sound Blvd., NW #110
(Mailing Address)
Boca Raton, Florida 33487

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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.

By: Jeffrey A. Levitz C T Corporation System
(Registered agent's signature)

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

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Manager	Jeffrey A. Levitz 5300 Broken Sound Blvd NW #110, Boca Raton FL 33487		

(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

Jeffrey A. Levitz, Manager

Typed or printed name of signer

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IN AND FOR THE COUNTY OF DADE
FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TOTTS, 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 NINTH DAY OF JANUARY, A.D. 2018.

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

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CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA



6664893 8300

SR# 20180136357

You may verify this certificate online at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State

Authentication: 201939305

Date: 01-09-18