

M18000000975

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

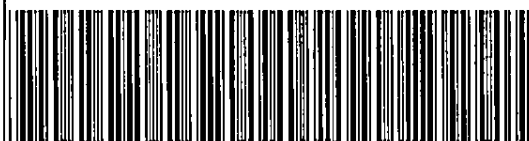
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Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W18 - 5244

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TALLAHASSEE, FLORIDA

JAN 29 2016

Y SULKER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 18, 2018

CRISTIE ALDEN  
1926 10TH AVE NORTH STE 410  
LAKE WORTH, FL 33461

SUBJECT: CHFIVE LLC  
Ref. Number: W18000005244

We have received your document for CHFIVE LLC and your check(s) totaling \$125.00. 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 State, 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 your filing will be considered abandoned.

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

Yasemin Y Sulker  
Regulatory Specialist II

Letter Number: 218A00001167

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** ChFive 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:

Cristie Alden

\_\_\_\_\_  
Name of Person

ChFive LLC

\_\_\_\_\_  
Firm/Company

1926 10th Ave North STE 410

\_\_\_\_\_  
Address

Lake Worth, FL 33461

\_\_\_\_\_  
City/State and Zip Code

cristie@ismarthealthcare.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cristie Alden

954

729-0563

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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

# 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. ChFive LLC

(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

(Jurisdiction under the law of which foreign limited liability company is organized)

3.

(FEI number, if applicable)

4.

(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1926 10th Ave North STE 410

(Street Address of Principal Office)

Lake Worth, FL 33461

6. Same

(Mailing Address)

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

Name: Cristie Alden

Office Address: 1926 10th Ave North STE 410

Lake Worth

(City)

, Florida 33461

(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.

*Cristie Alden*

(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:

Attached

(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

Randy Syrop, Dirac Holdings LLC, Member

Typed or printed name of signee

18 JAN 26 PM 2:48  
RECEIVED  
FLORIDA  
DEPARTMENT OF STATE

CHFive LLC  
1926 10<sup>th</sup> Ave North STE 410  
Lake Worth, FL 33461

January 16, 2018

To Whom It May concern:

Below is the ownership information for CHFive LLC as of this date:

Starman Holdings, LLC  
35A Smithfield Blvd, #325  
Plattsburgh, NY 12901

Dirae Holdings LLC  
6671 W Indiantown Rd  
#50-376  
Jupiter, FL 33458

Troisbey LLC  
4974 SW 34<sup>th</sup> Ter  
Ft Lauderdale, FL 33312

For Mootchie Inc.  
35A Smithfield Blvd, #325  
Plattsburgh, NY 12901

Winco Systems Inc  
1926 10<sup>th</sup> Ave North STE 410  
Lake Worth, FL 33461

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CLERK OF DISTRICT COURT  
JACKSONVILLE, FLORIDA

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "CHFIVE 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 TWENTY-SIXTH DAY OF JANUARY, A.D. 2018.

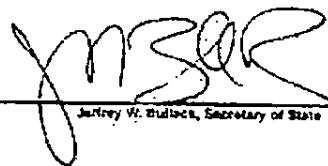
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CLERK OF COURT  
DELAWARE, FLORIDA



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SR# 20180516039

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 202041321

Date: 01-26-18