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Corporate Filing Menu

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0502, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter altability Company," "L.L.C,"		of transacting business in Florida. The alternate name must include
CONNECTICUT		3. N/A
Jurisdiction under the law (company is organized)	of which foreign limited hability	(FEI number, it applicable)
N/A	(Date first transacted business (See sections 605,0904 & 605.0	ss in Florida, if prior to registration.) 0905, F.S. to determine penalty liability)
3030 N. ROCKY POL	NT DR, STE 150A, TAMPA, FI	FL 33607
	(Street Address of Pr	Principal Office)
3030 N. ROCKY POI	NT DR, STE 150A, TAMPA, FL	
	(Mailing A	Address)
Name and street addres	is of Florida registered agent: (P.C	,
Name:	Northwest Registered Agent,	
Office Address:	3030 N. Rocky Point Dr.	. STE 150A
	Tampa	, Florida 33607
		(Zip code)
legistered agent's accep	(City)	in the standard limited liability comman
Taving been named as re lesignated in this applica o complywith the provision	tance: gistered agent and to accept servition, I hereby accept the appointments of all statutes relative to the point my position as registered agent.	wice of process for the above stated limited liability companiment as registered agent and agree to act in this capacity, proper and complete performance of my duties, and I am
Taving been named as re lesignated in this applica o complywith the provisi- accept the obligations of t	tance: gistered agent and to accept servition, I hereby accept the appoints ons of all statutes relative to the p my position as registered agent. (Registe	tment as registered agent and agree to act in this capacity, proper and complete performance of my duties, and I am series agent's signature?
Taving been named as re designated in this applica o complywith the provision accept the obligations of a S. The name, title or caps	tance: gistered agent and to accept servition, I hereby accept the appoints ons of all statutes relative to the p my position as registered agent. (Registereity and address of the person(s)	tment as registered agent and agree to act in this capacity. proper and complete performance of my duties, and I am Glove ered agent's signature) who has/have authority to manage is/are:
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Having been named as relesignated in this applicate of complywith the provision recept the obligations of the same, title or caps 535 Burritt Street, L	tance: gistered agent and to accept servition, I hereby accept the appointments of all statutes relative to the pury position as registered agent. (Registered and address of the person(s) to the person of the p	ered agent's signature) who has/have authority to manage is/are: ocky Point Dr. Ste 150A, Tampa, FL 33607 ays old, duly authenticated by the official having custody of ertificate is in a foreign language, a translation of the certific
Having been named as relesignated in this applicate of complywith the provision comply with the provision coupt the obligations of the same, title or caps 535 Burritt Street, L. D. Attached is a certificate jurisdiction under the law	tance: gistered agent and to accept servition, I hereby accept the appointments of all statutes relative to the pury position as registered agent. (Registered and address of the person(s) to the person of the p	ered agent's signature) who has/have authority to manage is/are: ocky Point Dr., Ste 150A, Tampa, FL 33607
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Typed or printed name of signee

Morgan Noble

• • •

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof. DO HEREBY CERTIFY, that articles of organization for

BURRITTFL, LLC

a domestic limited liability company, were filed in this office on January 05, 2018.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such limited liability company is in existence.

Secretary of the State

Denis Menk

Date Issued: February 01, 2018

Business ID: 1259675 Express Certificate Number: 2018067241001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov