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Requestor's Name)				
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MAIL MAIL				
Business Entity Name)				
(Document Number)				
Certificates of Status				
Special Instructions to Filing Officer:				

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January 29, 2018

JASON COHEN 36 NE 2ND ST, STE 520 MIAMI, FL 33132

SUBJECT: REEF COMMUNICATION GROUP, LLC

Ref. Number: W18000008821

We have received your document for REEF COMMUNICATION GROUP, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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

Octavia L Simmons Regulatory Specialist II

RECEIVED

Letter Number: 318A00001826

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. Reef Communications Grou (Name of Foreign Limit		ited Liability Company," "L.L.C.," or "LLC	2.")
If name unavailable, enter alternate name a	dopted for the purpose of transacting business in E	Florida. The alternate name must include "Limited	Liability Company," "L I, C," or "LLC,")
2. Delaware		3. 82-3306256	
(Jurisdiction under the law of which fo	oreign limited liability company is organized)		umber, if applicable)
November 7, 2017			
	(Date first transacted business in Florida, if prior (See sections 605,0904 & 605,0905, F.S. to deter	to registration.) mine penalty liability)	
36 NE 2nd. Street Ste 520)	6 36 NE 2nd. Street Ste 5	520
(Street Address of Princip	sal Office)	6. 36 NE 2nd. Street Ste 5	
Miami, FL 33132-2113		Miami, FL 33132-2113	
Name and struct address of	Florida registered agent: (P.O. Bo	NOT geographly)	
. Name and street address of	61 3	X <u>NOT</u> acceptable)	\$ CO
Name:	Cilean Donasia		- D
Office Address:	5810 SW 12	CT	
	Care Coral	Florida 339	14 星
Registered agent's acceptant		f process for the above stated limi	*
designated in this application to comply with the provisions	, I hereby accept the appointment	as registered agent and agree to a er and complete performance of n	act in this capacity: I further agi
0.000	,	•	
 The name, title or capacity <u>Title or Capacity:</u> 	and address of the person(s) who Name and Address:	has/have authority to manage is/are <u>Title or Capacity:</u>	:: Name and Address:
CEO	Jason Cohen	Finance Manager	Eileen Bonasia
	1 Rhododendron Ct.		5810 SW 1st Court
	Miller Place, NY 11764	_	Cape Coral, FL 33914
		_	
	}		
(Use attachments if necessary	,		
). Attached is a certificate of e	existence, no more than 90 days old which it is organized. (If the certific	l, duly authenticated by the official ate is in a foreign language, a trans	· .

Typed or printed name of signee

Jason Cohen

Signature of an authorized person



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

DELAWARE, DO HEREBY CERTIFY "REEF COMMUNICATIONS GROUP, 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.



Authentication: 201940603

Date: 01-09-18