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(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:	

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February 13, 2018

JENNIFER E OKCULAR 2775 SUNNY ISLES BLVD STE 118 NORTH MIAMI BEACH, FL 33160 US

SUBJECT: GOLDBERG-ESSERMAN, LLC

Ref. Number: W18000012995

We have received your document for GOLDBERG-ESSERMAN, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is A03000001353 - GOLDBERG ESSERMAN, LLLP.

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 the corrected original and one copy of 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.

Brittany M Figueroa Regulatory Specialist II Registration/Qualification Section

www.sunbiz.org

Letter Number: 318A00003001



Cassandra S. Nelson, Associate Richard B. Comiter, Of Counsel Mirlene E. Dubreuze, Office Manager

2775 Sunny Isles Boulevard, Suite 118
 North Miami Beach, Florida 33160
 305/932,2000 T • 305,932,6585 F

March 19, 2018

PERSONAL AND CONFIDENTIAL

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RE: Our Client: Lisa Esserman-Goldberg

Our File No.: 1989 (A.3)

Dear Sir/Madam:

Enclosed please find the following documents:

Goldberg-Esserman, LLC Ref No.: W18000012995

- Copy of Letter No.: 318A00003001 sent to us dated February 13, 2018;
- Letter of Authorization from managers of Goldberg-Esserman, LLLP for name usage:
- Certificate of Good Standing from State of Delaware; and
- Application by Foreign LLC for Authorization to Transact Business in Florida

Lisa Holdings, LLC

- Application by Foreign LLC for Authorization to Transact Business in Florida:
- Check payable to the Florida Department of State for \$125; and
- Certificate of Formation from the State of Delaware.

Should you have any questions, please feel free to contact me.

Very truly yours.

Alexandra Palacios

Legal Assistant

Enclosures

VIA Federal Express

Goldberg-Esserman, LLLP 5871 SW 91st Street Pinecrest, FL 33156

March 5, 2018

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Consent/Authorization of name usage

Dear Sir/ Madam:

As managers of the Goldberg-Esserman, LLLP, we authorize the name usage of the foreign entity, Goldberg-Esserman, LLC(document#:W18000012995) which is the general partner of the Goldberg-Esserman, LLLP.

Harris Goldberg, Manager

Lisa Esserman, Manager

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	GOLDBERG-ESS	ERMAN, LLC				
SUBJECT		Name of	Limited Liability	Company		
		reign Limited Liability Comp d to register the above refer				
Please return	all correspondence	concerning this matter to the	following:			
	Jennifer E. Oko	cular, Esq.				
		N'	ame of Person			
	Nelson & Nels	on, P.A.				
		Fi	irm/Company		·	
	2775 Sunny Isl	es Blvd., Suite 118				
		-	Address			
	North Miami B	each, FL 33160				
	··-	City/S	tate and Zip Code			
	Jennifer@estatet	•				
	•	E-mail address: (to be used	d for future annua	report no	tification)	
For further in	formation concernin	g this matter, please call:				
Jenr	nifer E. Okcular		305	932-20		
	Name o	of Contact Person	Area Code	Day	rtime Telephone Number	
Divi Regi P.O.	ILING ADDRESS: sion of Corporations stration Section Box 6327 ahassee, FL 32314			Division Registrat Clifton B 2661 Exc	of Corporations ion Section Building ecutive Center Circle see, FL 32301	
	check for the follow 125.00 Filing Fee	ing amount: \$\sum \text{\$\}}}}}\$}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}	□ \$155.00 Filit Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Co of Status & Certified Cop	

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:

Delaware (Jurisdiction under the law of which			iability Company," "L.L.C," or "LLC,")
(Jurisdiction under the law of whice		3. 82-4122091	
	ch foreign limited liability company is organized)	(FEI nur	uber, if applicable)
	(Date first transacted business in Florida, if proce to	registration 1	
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determine		
5871 SW 91st Street (Street Address of Pri	ne mai Office)	6. 5871 SW 91st Street (Mailing Ad	done
Miami, FL 33156		Miami, FL 33156	
 .		 	
	of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	Barry A. Neslon	· · · · · · · · · · · · · · · · · · ·	
Office Address:	2775 Sunny Isles Blvd., Suite 118	. <u></u>	
	North Miami Beach	, Florida 33160 (Zip co	
-	(City)	(Zip co	de)
signated in this application comply with the provision in	on, I hereby accept the appointment as us of all statutes relative to the proper of my position as registered agent.	s registered agent and agree to acc	d liability company at the pl t in this capacity. I further t duties, and I am familiar w
signated in this application comply with the provision of accept the obligations of the name, title or capaci	on, I hereby accept the appointment as us of all statutes relative to the proper of my position as registered agent. (Between the person(s) who has	s registered agent and agree to uci and complete performance of my signature.	t in this capacity. I further t
signated in this application comply with the provision of accept the obligations of the control	on, I hereby accept the appointment as ns of all statutes relative to the proper of my position as registered agent. (Refrented to the proper of my position as registered agent.	s registered agent and agree to uci and complete performance of my	t in this capacity. I further t
signated in this application comply with the provision of accept the obligations of the name, title or capaci	on, I hereby accept the appointment as us of all statutes relative to the proper of my position as registered agent. (Between the person(s) who has Name and Address: Lisa Esserman	s registered agent and agree to uci and complete performance of my signature.	t in this capacity. I further of duties, and I am familiar w
signated in this application comply with the provision of accept the obligations of the name, title or capacity:	on, I hereby accept the appointment as ns of all statutes relative to the proper of my position as registered agent. (Refruence of the person(s) who has Name and Address:	s registered agent and agree to uci and complete performance of my signature.	t in this capacity. I further of duties, and I am familiar w
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signated in this application comply with the provision of accept the obligations of the name, title or capacity:	ity and address of the person(s) who has Name and Address: Lisa Esserman 5871 SW 91st Street Miami, Ft. 33156 Harris Goldberg	s registered agent and agree to uci and complete performance of my signature.	t in this capacity. I further of duties, and I am familiar w
signated in this application comply with the provision of accept the obligations of the name, title or capacity: Manager	on, I hereby accept the appointment as as of all statutes relative to the proper of my position as registered agent. (Refiser the proper of my position as registered agent. (Refiser the proper of my position as registered agent. (Refiser the proper of my position as registered agent. (Refiser the proper of my position as registered agent. (Refiser the proper of my position as registered agent.) (Refiser the proper of my position as registered agent.) (Refiser the proper of my position as registered agent.) (Refiser the proper of my position as registered agent.) (Refiser the proper of my position as registered agent.) (Refiser the proper of my position as registered agent.) (Refiser the proper of my position as registered agent.) (Refiser the proper of my position as registered agent.) (Refiser the proper of my position as registered agent.)	s registered agent and agree to uci and complete performance of my signature.	t in this capacity. I further of duties, and I am familiar w

Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "GOLDBERG-ESSERMAN, 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 FIFTEENTH DAY OF MARCH, A.D. 2018.

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



Authentication: 202330853

Date: 03-15-18