M18000004194

(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	2000
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PALLAHASSEF



January 24, 2018

ALBERT CORRADA 2655 LEJEUNE RD STE 902 CORAL GABLES, FL 33134 US

SUBJECT: EDUARDO STELLA 26 LLC

Ref. Number: W18000007359

We have received your document for EDUARDO.STELLA 26 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):

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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: 718A00001585

COVER LETTER

то:	Registration Section Division of Corpora					
SUBJI	Eduardo.Stella 2	6 LLC				
0000		Name o	f Limited Liability	Company		
The en Exister	closed "Application by nce, and check are subm	Foreign Limited Liability Con hitted to register the above refe	npany for Authoriza renced foreign limi	ation to Tra ited liabilit	ansact Business in Florida," Ce cy company to transact business	rtificate of in Florida.
Please	return all corresponden	ce concerning this matter to th	e following:			
	Albert Corn	ada				
	<u></u>	1	Name of Person			
	Albert Corn	ada CPA				
			Firm/Company			
	2655 LeJeu	ne Road Suite 902				
			Address			
	Coral Gable	es, FL 33134				
		City/	State and Zip Code	;		
	acorrada@co	rradacpa.com				
		E-mail address: (to be use	ed for future annua	l report no	tification)	
For fur	ther information concer	ming this matter, please call:				
	Albert Corrada		305 at (804-85		
	Nam	ne of Contact Person	Area Code	Day	ytime Telephone Number	
	MAILING ADDRES Division of Corporati Registration Section P.O. Box 6327 Tallahassee, FL 3231	ons		Division Registrat Clifton B 2661 Exe	of Corporations cion Section Building ecutive Center Circle see, FL 32301	
Enclose	ed is a check for the foll \$125.00 Filing Fee		☐ \$155.00 Filin Certified Copy		☐ \$160.00 Filing Fee, Certified Copy	licate

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:

(If name unavailab	ble, enter alternate i	name adopted for the purpose of transacting business	in Florida. The	alternate name must include "Limited	Liability Com	pany," "L.L.C," or	"1.1.C.")
2. Delaware			3	30-0958052			
(Jurisdiction	under the law of w	hich foreign limited liability company is organized)	_ `	(FEI n	umber, if appl	licable)	
4. 05/15/20	118						
		(Date first transacted business in Florida, if p (See sections 605 0904 & 605 0905, F.S. to c	rior to registration letermine penalt	on) y liability)			
5. 2655 LeJ	Jeune Road		6.	2655 LeJeune Road			
Suite 902	(Street Address of	Principal Office)		(Mailing i	(ddress)		
<u> </u>				Suite 902			
Coral Gal	bles, FL 3313	<u>.</u>		Coral Gables, FL 33134		<u> </u>	
7. Name and	d street addre	ss of Florida registered agent: (P.O.	Box <u>NOT</u>	_acceptable)		UNE PAR	F
Nai	ime:	Albert Corrada				2 SEE - 2	1
Offi	ice Address:	2655 LeJeune Road Suite 902				<u> </u>	[17]
		Coral Gables	·	, Florida 33134		ENIP FORTE	\Box
				, Florida		<u> </u>	
Having been designated in to comply wi	n this applica ith the provisi	(City) Otance: orgistered agent and to accept service orgistered agent and to accept service otion, I hereby accept the appointme ions of all statutes relative to the price s of my position as registered agent	ent as regis. oper and de	(Zip is for the above stated limit tered agent and agree to a	ed liabili ct in this	ty company as capacity. I fi	irther agree
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Typed or printed name of signee

Claudia Alvarez Russi



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

DELAWARE, DO HEREBY CERTIFY "EDUARDO.STELLA 26 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 MARCH, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EDUARDO.STELLA 26 LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF JULY, A.D. 2016.

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

Authentication: 202389109

Date: 03-26-18