

M18000004972

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

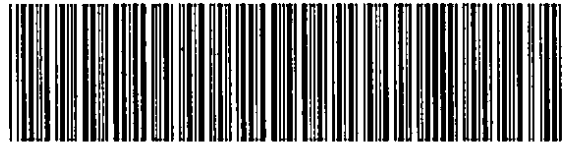
(Document Number)

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18 MAY 21 PM 2:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K SAI Y
MAY 23 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: F.M.M. Group 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:

Frank Mueller

Name of Person

F.M.M. Group LLC

Firm/Company

200 So Biscayne Blvd., Suite 1770

Address

Miami, FL 33131

City/State and Zip Code

finm@finm.life

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

For further information concerning this matter, please call:

David M. Turner, CPA

305
at ()

377-0707

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. F.M.M. Group 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 3. 35-2605727
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. May 1, 2018
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 200 So. Biscayne Blvd., Suite 1770 6. 200 So. Biscayne Blvd., Suite 1770
(Street Address of Principal Office) (Mailing Address)
Miami, FL 33131 Miami, FL 33131

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

Name: David M. Turner
Office Address: 200 So. Biscayne Blvd., Suite 1770
Miami, Florida 33131
(City) (Zip code)

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STATE OF FLORIDA
DEPARTMENT OF STATE

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.

 5/16/18
(Registered agent's signature)

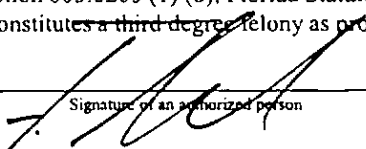
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Manager</u>	<u>Frank Mueller</u> <u>200 So. Biscayne Blvd., #1770</u> <u>Miami, FL 33131</u>		

(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
Frank Mueller
Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "F.M.M. 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 TWELFTH DAY OF APRIL, A.D. 2018.

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18
SECRETARY OF STATE
MAIL ROOM




Jeffrey W. Bullock, Secretary of State

6536414 8300

SR# 20182161552

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202498380

Date: 04-12-18



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 9, 2018

FRANK MUELLER
F.M.M. GROUP LLC
200 SO BISCAYNE BLVD, STE. 1770
MIAMI, FL 33131

SUBJECT: F.M.M. GROUP LLC
Ref. Number: W18000043340

We have received your document for F.M.M. GROUP 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.

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.

Karen A Saly
Regulatory Specialist II

Letter Number: 218A00009615

RECEIVED

MAY 21 AM 10:07

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL