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(Requestor's Name)							
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(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Sasiness Entry Name)							
(Document Number)							
Certified Copies Certificates of Status							
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Special Instructions to Filing Officer:							

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SECRETARIE DE 1815



May 3, 2018

GENERAL COUNSEL 11150 N WILLIAM ST SUITE 108-500 DUNNELLON, FL 34432

SUBJECT: ELATHA CAPITAL, LLC Ref. Number: W18000041350

We have received your document for ELATHA CAPITAL, 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 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.

Letter Number: 518A00009097

Justin M Shivers
Regulatory Specialist II Supervisor
Registration/Qualification Section

COVER LETTER

TO:

TO:	Registration Section Division of Corporation	ns						
SUBJI	Elatha Capital, LLC							
3015.	<u></u>	Name of	Limited Liability (Company				
					ansact Business in Florida," Certifi y company to transact business in I			
Please	return all correspondence of	concerning this matter to the	following:					
	General Couns	el						
		N	ame of Person					
	Elatha Capital,	LLC						
		Firm/Company						
	11150 North W	11150 North Williams Street, Suite 108-500						
	 	Address						
	Dunnellon, Flo	Dunnellon, Florida 34432						
		City/State and Zip Code						
	elathacapital@gr	nail.com						
		E-mail address: (to be use	d for future annual	report no	tification)			
For fu	rther information concernin	g this matter, please call:						
	General Counsel	eneral Counsel			222			
	Name o	of Contact Person	at (Area Code	Day	ytime Telephone Number			
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exe	r ADDRESS: of Corporations tion Section Building ecutive Center Circle see, FL 32301			
Enclos	sed is a check for the follow \$125.00 Filing Fee	ing amount: S130.00 Filing Fee & Certificate of Status	□ \$155.00 Filis Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Certificat of Status & Certified Copy	.e		

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 Elatha Capital, LLC			
(Name of Foreign	Limited Liability Company; must include "Limi	ited Liability Company," "L.L.C.," or "LLC.")	
Transport of the second	name adopted for the purpose of transceting business in F	don't. The charges rates out include "I mond bish	dis Commune ""1 1 (" or "11 (")
	mine applying for the purpose of transacting custows in t	grade the angular man mender camed con-	may Conquiny, 12000, St. 1000, J
Delaware Unisdiction under the law of w	hich foreign limited liability company is organized)	3	a, if applicable)
NI/A			
4. <u>N/A</u>	(Date first transacted business in Honda, if prior i (See sections 605 0904 & 605 0905, F.S. to deter	to registration)	
m 4 0 5 1 1 1 C	(See sections 605 0904 & 605 0905, F.S. to deter		
Elatha Capital, LLC	huscinal Office)	6. Elatha Capital, LLC (Mahing Addition	<u>≥c - : </u>
11150 North Williams	-	11150 North Williams Stree	
Dunnellon, Florida 34	432	Dunnellon, Florida 34432	
			S 22 1
7. Name and street addres	ss of Florida registered agent: (P.O. Be	ox NOT acceptable)	
	Capitol Corporate Se		
Name:	515 East Park Ave.,		
Office Address:	515 East Park Ave.,	프라 등	
	Tallahassee,	Clarita 32301	
	(City)	, Florida 32301 (Zip code)
	is of my position as registered agent. Duanu Cas (Registered agent	L Delanie Case, ass	t. sec.
	(Registered agent	(signatur)	
8. The name, title or cap <u>Title or Capacity:</u>	acity and address of the person(s) who Name and Address:	has/have authority to manage is/are: <u>Title or Canacity:</u>	Name and Address:
Sole Member	Elatha Management, LLC		
		-	
			
(Use attachments if neces	ssary)		
	e of existence, no more than 90 days old of which it is organized. (If the certific submitted)		
	cuted in accordance with section 605.02 to the Department of State constitutes a Michael Schindlin Signature	third degree felony as provided for in s	
	Signat	use of an authorized person	
	Michael Schindler		

Typed or printed name of signee

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ELATHA CAPITAL, 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 FIFTH DAY OF MARCH, A.D. 2018.

6775136 8300 SR# 20181696114

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

Authentication: 202258266

Date: 03-05-18