6/7/2018



Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H180001722143)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page	٥,
Doing so will generate another cover sheet.	_

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Fax Number

: (614)280-3338 : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

Foreign Limited Liability Company EIV 5280, LLC

والمستقد البرياء والمستقد والمستقدين فالمراض والمستقد والمستقد والمستقد والمستقد والمستقد والمستقد والمستقد	
Certificate of Status	0
Certified Copy	
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0XIZ, FLORIDA STATUTES, THE FOLLOWING IS SCHMITTED TO REGISTER A FOREKIN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

EIV 5280, LLC			
(Name of Forcing)	Limited Liability Company; must include "Limited	d Liability Company," "Lit.C.," or [LLC.)	j
	भारी हां व्यक्तामा कुलाज्यत्याति कि काल्यामा करी साते विकारकीय जाता	ids. The alternate reace must include "Limited Lie	Fility Company, "Tut. C," or "LLC.")
	the society in the his pase of numerous function of the		
Delaware	tick foreign limited liability company is organized)	3. (FEI num	our, if apprendict)
•			
	Date tirst transacted hissiness in Horiza, if prior to (See scotions 605,0964 & 605,0905, ft.S. to determine	registration:	
	(See scottons 605,0904 & 605,0905, F.S. to determi	ine penalty hability)	
		6. (Vieling Add	(CU)
5. (Street Address of Principal Office) 2875 NE 191st St., Ste 800		2875 NE 191st St., Ste 800	
Miami, FL 33180		Miami, FL 33180	
Whatti, 1775,770			¥. 2
	ss of Florida registered agent: (P.O. Box	NOT acceptable)	
Name and Street address		<u></u>	<u> </u>
Nume:	CT Corporation System		ANIII
Office Address:	1200 South Pine Island Road	<u>-</u>	
CHIEC MUNICIPALITY	***	73 124	<u> </u>
	Plantation (Cay)	, Florida Zip 👓	de: = =
comply with the provis-	ution, I hereby accept the appointment of ions of all statutes relative to the proper	process for the above stated limite is registered agent and agree to ac r and complete performance of my	
o comply with the provisi nd accept the obligation		r and complete performance of my	duties, and I am fomiliar with
o comply with the provis- nd accept the obligation	tion, I hereby accept the appointment of ions of all statutes relative to the proper is of my position as registered agent. By: CT Corporation System (Registered agent's	r and complete performance of my	eduties, and I am familiar with edy Laughrey Asst. Secret
o comply with the provisind accept the obligation 8. The name, title or cap	iden, I hereby accept the appointment of ions of all statutes relative to the property of my position as registered agent. By: CT Corporation System	r and complete performance of my	eduties, and I am familiar with edy Laughrey Asst. Secret
o comply with the provis- nd accept the obligation 3. The name, title or cap <u>Title or Capacity:</u>	ition, I hereby accept the appointment of ions of all statutes relative to the property of my position as registered agent. By: CT Corporation System (Registered agent's acity and address of the person(s) who have and Address:	Kimb A registered agent and agree to determine of my Kimb A significant As have authority to manage is/are:	eduties, and I am formitian with edy Laughrey Asst. Secrets Name and Address: Shlono Khoudari
n comply with the provision accept the obligation 3. The name, title or cap	titon, I hereby accept the appointment of ions of all statutes relative to the property of my position as registered agent. By: CT Corporation System (Registered agents) acity and address of the person(s) who have and Address: Juan Deangulo 2875 NF 191st St., Ste 800	Kimb signature) A registered agent and agree to deer and complete performance of my Kimb signature) tas/have authority to manage is/are: Title or Canacity:	edutics, and I am familiar with edy Laughrey Asst. Secrets Name and Address: Shlomo Khoudari 2875 NF 191st St., Stc 800
o comply with the provis- nd accept the obligation 3. The name, title or cap <u>Title or Capacity:</u>	ition, I hereby accept the appointment of ions of all statutes relative to the properties of my position as registered agent. By: CT Corporation System (Registered agents acity and address of the person(s) who have and Address: Juan Deangulo	Kimb signature) A registered agent and agree to deer and complete performance of my Kimb signature) tas/have authority to manage is/are: Title or Canacity:	eduties, and I am familiar with edy Laughrey Asst. Secrets Name and Address: Shlono Khoudari
o comply with the provision accept the obligation 3. The name, title or cap Title or Capacity: MGR	acity and address of the person(s) who h Name and Address: Juan Deangulo 2875 NF. 191st St Stc 800 Miami, FL 33180	kimb signature) in the or Canacity: MGR	edutics, and I am familiar with edy Laughrey Asst. Secrets Name and Address: Shlomo Khoudari 2875 NF 191st St., Stc 800
comply with the provising accept the obligation The name, title or cap Title or Capacity:	acity and address of the person(s) who h Name and Address: Juan Deangulo 2875 NE 191st St Ste 800 Miami, FL 33180 Sylvain Argy	Kimb signature) A registered agent and agree to deer and complete performance of my Kimb signature) tas/have authority to manage is/are: Title or Canacity:	eduties, and I am familiar with edy Laughrey Asst. Secret Name and Address: Shlomo Khoudari 2875 NE 191st St., Ste 800 Miami, Ft. 33180 Jacobo Azout 2875 NE 191st St., Ste 800
n comply with the provisional accept the obligation 3. The name, title or cap. Title or Capacity: MGR	acity and address of the person(s) who h Name and Address: Juan Deangulo 2875 NF. 191st St Stc 800 Miami, FL 33180	kimb signature) in the or Canacity: MGR	Name and Address: Shlomo Khoudari 2875 NE 191st St., Ste 800 Miami, F1, 33180
is comply with the provisional accept the obligation is. The name, title or cap Title or Capacity: MGR MGR	acity and address of the person(s) who h Name and Address: Juan Deangulo 2875 NE 191st St., Ste 800 Miami, Fl. 33180	kimb signature) in the or Canacity: MGR	eduties, and I am familiar with edy Laughrey Asst. Secret Name and Address: Shlomo Khoudari 2875 NE 191st St., Ste 800 Miami, Ft. 33180 Jacobo Azout 2875 NE 191st St., Ste 800
icomply with the provising accept the obligation i. The name, title or cap Title or Capacity: MGR MGR	acity and address of the person(s) who h Name and Address: Juan Deangulo 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Systam SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS	Kimb Kimb	Name and Address: Shlomo Khoudari 2875 NE 191st St., Ste 800 Miami, Ft. 33180 Jacobo Azout 2875 NE 191st St., Ste 800 Miami, Ft. 33180
The name, title or cap Title or Capacity: MGR MGR	acity and address of the person(s) who h Name and Address: Juan Deangulo 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Systam Syst	MGR MGR	Name and Address: Shlomo Khoudari 2875 NE 191st St. Ste 800 Miami, Ft. 33180 Jacobo Azout 2875 NE 191st St. Ste 800 Miami, Ft. 33180
i. The name, title or cap Title or Capacity: MGR Use attachments if neces: Attached is a certificate or displaying the law	acity and address of the person(s) who h Name and Address: Juan Deangulo 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Sylvain Argy 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Second States of the person of	MGR MGR	Name and Address: Shlomo Khoudari 2875 NE 191st St. Ste 800 Miami, Ft. 33180 Jacobo Azout 2875 NE 191st St. Ste 800 Miami, Ft. 33180
o comply with the provising accept the obligation 3. The name, title or cap Title or Capacity: MGR MGR Use attachments if neces of Attached is a certificate arisdiction under the law of the translator must be s	acity and address of the person(s) who have and Address: Juan Deangulo Sylvain Argy 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Sylvain Argy 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Sylvain Argy 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Sylvain Argy 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Sylvain Argy 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Sylvain Argy (If the certifical submitted)	mand complete performance of my kimb signature) sashave authority to manage is/are: Title or Canacity: MGR MGR Aduly authenticated by the official ate is in a foreign language, a transl.	Name and Address: Shlomo Khoudari 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Jacobo Azout 2875 NE 191st St., Ste 800 Miami, FL 33180 having custody of records in the ation of the certificate under out
o comply with the provisind accept the obligation 3. The name, title or cap Title or Capacity: MGR MGR (Use attachments if neces or Attached is a certificate urisdiction under the law of the trunslator must be s	acity and address of the person(s) who have and Address: Juan Deangulo Sylvain Argy 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Ssary) e of existence, no more than 90 days old to of which it is organized. (If the certifical submitted)	MGR Auly authenticated by the official late is in a foreign language, a translate is in a foreign language.	Name and Address: Shlomo Khoudari 2875 NE 191st St., Ste 800 Miami, Ft. 33180 Jacobo Azout 2875 NE 191st St., Ste 800 Miami, Ft. 33180 having custody of records in the ation of the certificate under out ure that any false information
ocomply with the provising accept the obligation 3. The name, title or cap Title or Capacity: MGR MGR Use attachments if necessors accepting the companion of the companion o	acity and address of the person(s) who have and Address: Juan Deangulo Sylvain Argy 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Sylvain Argy 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Sylvain Argy 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Sylvain Argy 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Sylvain Argy 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Sylvain Argy (If the certifical submitted)	MGR Auly authenticated by the official late is in a foreign language, a translate is in a foreign language.	Name and Address: Shlomo Khoudari 2875 NE 191st St., Ste 800 Miami, Ft. 33180 Jacobo Azout 2875 NE 191st St., Ste 800 Miami, Ft. 33180 having custody of records in the ation of the certificate under out ure that any false information
ocomply with the provising accept the obligation 3. The name, title or cap Title or Capacity: MGR MGR Use attachments if necessors accepting the companion of the companion o	acity and address of the person(s) who have and Address: Juan Deangulo Sylvain Argy 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Ssary) e of existence, no more than 90 days old to of which it is organized. (If the certifical submitted)	mand complete performance of my kimb signature) sas have authority to manage is are: Title or Canacity: MGR MGR Aduly authenticated by the official ate is in a foreign language, a translate is in a foreign language, a translate is in a foreign language.	Name and Address: Shlomo Khoudari 2875 NE 191st St., Ste 800 Miami, Ft. 33180 Jacobo Azout 2875 NE 191st St., Ste 800 Miami, Ft. 33180 having custody of records in the ation of the certificate under out ure that any false information
ocomply with the provising accept the obligation 3. The name, title or cap Title or Capacity: MGR MGR Use attachments if necessors accepting the companion of the companion o	acity and address of the person(s) who have and Address: Juan Deangulo Sylvain Argy 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Ssary) e of existence, no more than 90 days old to of which it is organized. (If the certifical submitted)	MGR Auly authenticated by the official late is in a foreign language, a translate is in a foreign language.	Name and Address: Shlomo Khoudari 2875 NE 191st St., Ste 800 Miami, Ft. 33180 Jacobo Azout 2875 NE 191st St., Ste 800 Miami, Ft. 33180 having custody of records in the ation of the certificate under out
S. The name, title or cap Title or Capacity: MGR MGR (Use attachments if necessors according to a certificate or capacity in the certificate or capacit	acity and address of the person(s) who have and Address: Juan Deangulo Sylvain Argy 2875 NE 191st St., Ste 800 Miami, Fl. 33180 Ssary) e of existence, no more than 90 days old to of which it is organized. (If the certifical submitted)	mand complete performance of my kimb signature) sas have authority to manage is are: Title or Canacity: MGR MGR Aduly authenticated by the official ate is in a foreign language, a translate is in a foreign language, a translate is in a foreign language.	Name and Address: Shlomo Khoudari 2875 NE 191st St., Ste 800 Miami, Ft. 33180 Jacobo Azout 2875 NE 191st St., Ste 800 Miami, Ft. 33180 having custody of records in the ation of the certificate under out ure that any false information



Page 1

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

DELAWARE, DO HEREBY CERTIFY "EIV 5280, 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 SEVENTH DAY OF JUNE, A.D. 2018.

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

6882200 8300

SR# 20185025064

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

Suffrey W. Bullace, Exceedary of State

Authentication: 202839749

Date: 06-07-18