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COVER LETTER

TO:

Registration Section

Division of	of Corporation	S				
SUBJECT:	AEG	Partners F Name of	locity d	Company	. _	
					nsact Business in Florida," Cer company to transact business	
Please return all co	rrespondence c	oncerning this matter to the	following:			
-		Gi	Abod,			
-	<u>A</u>	EG Partners	Florida irm/Company	L	<u>-</u> C	
-		1556 N (Sth Ter	- 		
-		Holly word, City/s gild E-mail address: (to be use	F C State and Zip Code	330	20	
		E-mail address: (to be use	aboodi (g ach	itication)	
For further informa	ition concernin	g this matter, please call.				
		Aloso Ai F Contact Person	at (<u>20 l</u> Area Code) <u>&</u> Dayt	71-7878	
Division o Registrati P.O. Box	G ADDRESS: of Corporations on Section 6327 ee, FL 32314			Division of Registrati Clifton Bi 2661 Exe	ADDRESS: of Corporations on Section uilding eutive Center Circle ee, FL 32301	
Enclosed is a cheel ☐ \$125.0	k for the follow 0 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certified Status & Certified Copy	icate

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

IN COMPLANCE WITH SECTION 6050802 FLORIDA STATUTES, THE FOLLOWING IS SUBSTITIED TO REGISTER A FOREKIN TIMITED LABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA: AEG Partners Florida LLC
(Name of Foreign Limited Linbility Company: "LLC." or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Lumited Liability Company," "L. U.C." or "LLC.") Delaware 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: 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. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are; Title or Capacity: Title or Capacity: Name and Address: (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.

Page 1

Delaware The First State

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

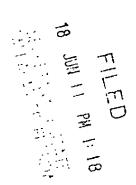
DELAWARE, DO HEREBY CERTIFY "AEG PARTNERS FLORIDA LLC" IS DULY

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 ANNUAL TAXES HAVE BEEN PAID TO DATE.



4741433 8300

SR# 20182178701

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

Authentication: 202389393

Date: 03-26-18



March 14, 2018

GIL ABOODI 1556 N 15TH TER HOLLYWOOD, FL 33020 US

SUBJECT: AEG PARTNERS FLORIDA LLC

Ref. Number: W18000024955

We have received your document for AEG PARTNERS FLORIDA LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

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 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: 518A00005204

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org