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(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:
W18-22773

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03/06/18--01016--030 \*\*125.00



R. WHITE JUN 2 0 2018



## FLORIDA DEPARTMENT OF STATE Division of Corporations

May 8, 2018

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LYNN MITEVA 1395 BRICKELL AVE #800 MIAMI, FL 33131

SUBJECT: RIKEZA FINANCE GROUP, LLC Ref. Number: W18000022773

We have received your document for RIKEZA FINANCE 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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.

Justin M Shivers Regulatory Specialist II Supervisor Registration/Qualification Section

Letter Number: 418A00004745

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## **COVER LETTER**

TO:	<b>Registration Section</b>
	Division of Corporations

**RIKEZA FINANCE GROUP, LLC** 

SUBJECT: \_\_\_\_

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:

LYNN MITEVA

Name of Person

RIKEZA FINANCE GROUP LLC

Firm/Company

1395 BRICKELL AVE # 800

Address

MIAMI, FL 33131

City/State and Zip Code

lynnmiteva@gmail.com

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

For further information concerning this matter, please call:

Lynn Miteva		78) at ( )	62525260
Name	of Contact Person	Area Code	Daytime Telephone Number
MAILING ADDRESS		STR	EET ADDRESS:
Division of Corporation	S	Divi	sion of Corporations
Registration Section		Regi	stration Section
P.O. Box 6327		Clift	on Building
Tallahassee, FL 32314		2661	Executive Center Circle
		Talla	ihassee, FL 32301
Enclosed is a check for the follow	ving amount:		
<b>\$</b> 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	IJABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	

## 1. RIKEZA FINANCE GROUP LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC.," or "LLC.")

DECAWARG				
DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized)		3	number, if applicable)	
no transaction yet	······································			
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	úne penalty liability)		
1395 Brickell Avenue	e Suite 800	6. 1395 Brickell Avenue S	Suite 800	
(Street Address of Principal Office)		(Mailing Address)		
Miami, FL 33131		Miami, FL 33131		
Name and street addr	ess of Florida registered agent: (P.O. Bo	( <u>NOT</u> acceptable)		
Name:	Lynn Miteva		s <b>1</b>	
Office Address:	1395 Brickell Avenue Suite 800			
	Miami	Florida <u>33131</u>		
	(City)		p code)	
aving been named as i esignated in this applic comply with the provi	registered agent and to accept service of sation, I hereby accept the appointment of sions of all statutes relative to the prope ns of my position as registered agent.	is registered agent and agree to	act in this capacity. I further a	
esignated in this applic comply with the provi	registered agent and to accept service of ation, I hereby accept the appointment of sions of all statutes relative to the prope	is registered agent and agree to r and complete performance of i	act in this capacity. I further a	
aving been named as i signated in this applic comply with the provi ad accept the obligation	registered agent and to accept service of eation, I hereby accept the appointment of sions of all statutes relative to the prope- ns of my position as registered agent.	as registered agent and agree to r and complete performance of t 	act in this capacity. I Jurther a my duties, and Lam familiar wi	
aving been named as i signated in this applic comply with the provi accept the obligation	registered agent and to accept service of sation, I hereby accept the appointment of sions of all statutes relative to the prope- ns of my position as registered agent.	as registered agent and agree to r and complete performance of t 	act in this capacity. I Jurther a my duties, and Lam familiar wi	
aving been named as i signated in this applic comply with the provi ad accept the obligation . The name, title or ca	registered agent and to accept service of sation, I hereby accept the appointment of sions of all statutes relative to the prope- ns of my position as registered agent. 	as registered agent and agree to r and complete performance of t signature) as/have authority to manage is/ar	act in this capacity. I Jurther a my duties, and Lam fangiliar wi	

(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.

an	
 Signature of an authorized person	
LYNN Milera	
Typed or printed name of signee	



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RIKEZA FINANCE 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 TWENTY-SIXTH DAY OF APRIL, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RIKEZA FINANCE GROUP, LLC" WAS FORMED ON THE NINTH DAY OF OCTOBER, A.D. 2017.

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



cretary of State

Authentication: 202586572 Date: 04-26-18

6573319 8300

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SR# 20183057117 You may verify this certificate online at corp.delaware.gov/authver.shtml Page 1