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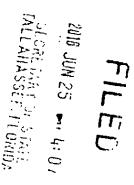
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June 5, 2018

MAX ADAMS 2151 S LEJEUNE RD SUITE 306 CORAL GABLES, FL 33134

SUBJECT: RAKOFSKY HOLDINGS, LLC

Ref. Number: W18000052436

We have received your document for RAKOFSKY HOLDINGS, 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 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 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: 618A00011665

Justin M Shivers
Regulatory Specialist II Supervisor
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

TO:	Registration Sec Division of Corp					
SUBJE		Y HOLDINGS, LLC				
		Name	of Limited Liability Company			
				ansact Business in Florida," Certificate of y company to transact business in Florida.		
Please	return all correspor	ndence concerning this matter to	the following:			
	MAX A	ADAMS				
	Name of Person					
	THE M	IEDI LAW FIRM				
Firm/Company						
2151 S LEJUENE ROAD SUIOTE 306						
Address						
	CORAL GABLES, FL, 33134					
City/State and Zip Code						
	INFO@1	THEMEDILAWFIRM.COM				
		E-mail address: (to be t	used for future annual report no	tification)		
For fun	ther information co	oncerning this matter, please call:				
	MAX ADAMS		305 444-3-	484		
		Name of Contact Person	Area Code Da	ytime Telephone Number		
MAHLING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registra Clifton E 2661 Ex	of Corporations tion Section Building ecutive Center Circle see, FL 32301			
Enclose	ed is a check for the \$125.00 Filing	e following amount: g Fee	& □ \$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 FORFIGN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: RAKOFSKY HOLDINGS 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 "L.C.") 3. 82-3149669 2 DELAWARE (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) MAY 30, 2018 (Date first transacted business in Florida, if prior to registration.)
(See sections 605,0904 & 605,0905, F.S. to determine penalty hability) 6. 77 ARVIDA PARKWAY 77 ARVIDA PARKWAY (Mailing Address) (Street Address of Principal Office) CORAL GABLES, FL, 33156 CORAL GABLES, FLORIDA, 33156 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) THE LAW OFFICES OF MAX A ADAMS ESQ PLIC Name: 2151 S LEJEUNE ROAD SUITE 306 Office Address: Florida 33134 CORAL GABLES (Cxy) 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. (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Name and Address: Title or Capacity: Title or Capacity: Name and Address: DANIELLE GUAY MGR MGR JONATHAN RAKOFSKY 77 ARVIDA PARKWAY 77 ARVIDA PARKWAY CORAL GABLES, FL. 33156 CORAL GABLES, FL, 33156 (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. UL ALL BURLOTIZES DEFION

Typed or printed name of signee

JONATHAN RAKOFSKY

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "RAKOFSKY HOLDINGS 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 ELEVENTH DAY OF JUNE, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID "RAKOFSKY HOLDINGS LLC" IS A SERIES LIMITED LIABILITY COMPANY.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RAKOFSKY HOLDINGS LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF AUGUST, A.D. 2017.

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

Authentication: 202855322

Date: 06-11-18

6520253 8300E SR# 20185071673