

W18000006063

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

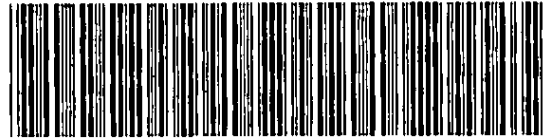
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W18-36949 RA Sign + Cuo

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18 JUN 26 PM 4:07
CLERK OF STATE
TALLAHASSEE, FL 32301

K. SALY

JUN 29 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: FB REAL ESTATE INVESTMENTS LLC

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:

PAULO FACTOR

Name of Person

SAFETY TAX & BOOKKEEPING

Firm/Company

6220 S ORANGE BLOSSOM TRAIL, SUITE 600

Address

ORLANDO, FL 32809

City/State and Zip Code

SUPPORT@SAFETYTAX.COM

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

For further information concerning this matter, please call:

PAULO FACTOR

407

888 4747

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$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 LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. FB REAL ESTATE INVESTMENTS 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 "LLC.")

2. DELAWARE 3. 3200429384
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. APRIL 1st. 2018
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 16192 COASTAL HWY 6. 3344 ROBERT TRENT JONES DR APT 104
(Street Address of Principal Office) (Mailing Address)
LEWES, DE 19958 ORLANDO, FL 32835

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

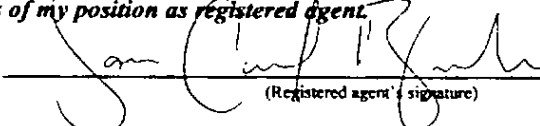
Name: SARA CABRAL BRANDAO

Office Address: 3344 ROBERT TRENT JONES DR APT 104

ORLANDO, Florida 32835
(City) (Zip code)

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)

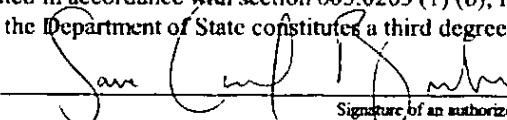
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>MANAGER</u>	<u>SARA CABRAL BRANDAO</u>		
	<u>3344 ROBERT TRENT JONE</u>		
	<u>ORLANDO, FL 32835</u>		

(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.


Signature of an authorized person

SARA CABRAL BRANDAO - MANAGER
Typed or printed name of signee

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TALLAHASSEE, FLORIDA

Delaware

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FB REAL ESTATE INVESTMENTS 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 NINETEENTH DAY OF JUNE, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FB REAL ESTATE INVESTMENTS LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF MARCH, A.D. 2014.

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

FILED
18 JUN 26 PM 4:07
SECRETARY OF STATE
DELAWARE



5506419 8300

SR# 20185234221

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


Jeffrey W. Bullock, Secretary of State

Authentication: 202911436

Date: 06-19-18



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 18, 2018

PAULO FACTOR
SAFETY TAX & BOOKKEEPING
6220 S ORANGE BLOSSOM TRAIL, STE 600
ORLANDO, FL 32809

SUBJECT: FB REAL ESTATE INVESTMENTS LLC
Ref. Number: W18000036949

We have received your document for FB REAL ESTATE INVESTMENTS LLC and your check(s) totaling \$130.00. 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.

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 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.

Karen A Saly
Regulatory Specialist II

Letter Number: 718A00007928

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2018 MAY 14 AM 11:57

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 15, 2018

PAULO FACTOR
SAFETY TAX & BOOKKEEPING
6220 S ORANGE BLOSSOM TRAIL, STE 600
ORLANDO, FL 32809

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Ref. Number: W18000036949

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If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 318A00010102

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2018 JUN 26 AM 11:04

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL