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(Requestor's Name) (Address)	300316036053
(Address) (City/State/Zip/Phone #)	07/23/1801012024 ++125.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	FILED 2011 JUL 23 PH 4: 42 SECRE FARY OF STATE TALLAHASSEE FLORIDA
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#### TO: Registration Section Division of Corporations

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## SUBJECT: Foothill Management, 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:

	Be	esty Jacob					
- <u>-</u>	Na	nne of Person					
					<del></del>		
	F1	⊓n/Company					
	350 N. Federa	al Hwy., Unit 71	5				
		Address					
Boynton Beach, FL 33435							
City/State and Zip Code						2818	-
	entity.creation@leg						
<b></b>	E-mail address: (to be used	I for future annual	report no	tification)	255	23	
For further information concernin	g this matter, please call:				<b>F</b>	ba Bd	
Besty Ja	icob	at ( <b>954</b>	_)55	4-9331		<b>F: \$</b> 2	1
Name o	of Contact Person	Area Code	Daj	ytime Telephon	e Number	iv.	
MAILING ADDRESS: Division of Corporation Registration Section			Division Registrat	T ADDRESS: of Corporation tion Section	s		
P.O. Box 6327 Tallahassee, FL 32314				Building ecutive Center ( see, FL 32301	Circle		
Enclosed is a check for the follow		🗖 \$155.00 E35	a baa k	🗆 \$160.00 F	ilina Feo - C	ortifiz	nte
S125.00 Filing Fee	□ \$130.00 Filing Fee & Certificate of Status	Certified Copy	ig ree œ	of Status & C	-		an

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#### 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. Foothill Management, LLC

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

(If	name unavailable, enter alternate na	ame adopted for the purpose of transacting bu	isiness in Florida. The a	lternate name must inclu	de "Limited Liabil	hty Company," "L.I. C,"	" or "LLC ")
2	Alaska		3.				
÷.,		uch foreign lunited liability company is organ			(FEI number	r, if applicable)	
4.							
		(Date first transacted business in Florid (See sections 605.0904 & 605 0905, F.	la, if prior to registration S, to determine penalty	i.) liability)	-		
5.	1231 W. Norther	n Lights Blvd. #911	6,	350 N. Fede	Mailing Addre		
	Anchorage, AK			Boynton Bea		- F S	
		· · · · · · · · · · · · · · · · · · ·				22 10	· [
							m
7.	Name and street addres	ss of Florida registered agent: (	P.O. Box <u>NOT</u>	acceptable)		FLOI	
	Name:	Besty Jacob				DRID	
	Office Address:	350 N. Federal Hwy., L	Jnit 715			A	
		Boynton E	Beach	Florida	33435		
		(City	)		(Zip code)	 I	
H de to	esignated in this application comply with the provision of the second states states of the second states of the second states states of	gistered agent and to accept se tion, I hereby accept the appoint ons of all statutes relative to th s of my position as registered a	ntment as regist e proper and co	ered agent and a	gree to act ii	n this capacity.	I further agree
		m	In	2			
		(Regist	ered sent's signature)				
8		icity and address of the person(s					
	Title or Capacity:	Name and Address:	<u> </u>	itle or Capacity:		Name and Add	<u>dress:</u>
	Member	Besty Jacob					
		<u>350 N. Federal Hwy.</u> Boynton Beach, FL 33					
	Member	Sam Jacob					
		6335 Hawks Bluff Ave					
		Davie_FL 33331					

(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)

Signature of an authorized person

10. This document is executed in accordance with section 6050203 (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.

Besty Jacob Typed or printed name of signee

Alaska Entity #10072090

# State of Alaska Department of Commerce, Community, and Economic Development Corporations, Business, and Professional Licensing

# **Certificate of Compliance**

The undersigned, as Commissioner of Commerce, Community, and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

### Foothill Management, LLC

This entity was formed on November 20, 2017 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective July 13, 2018.

Milee Marane

Mike Navarre Commissioner