# M18000001820

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone#	<del>,</del>
(G.	,	,
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name	)
~		
(Do	ocument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	

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18 AUG 21 PH 3: 53 SECRETARY OF STATE FALLAHASSEE, FLORIDA

AUG 2 5 2018

T SCHROEDED

### **COVER LETTER**

TO:

Registration Section

Division of C	Corporation	ns			
	R GROUP.	LLC			
		Name of	Limited Liability C	Company	
The enclosed "Application of the Existence, and check a	ition by For ire submitte	eign Limited Liability Com d to register the above refer	pany for Authoriza enced foreign limit	tion to Tra ed liability	nsact Business in Florida," Certificate of company to transact business in Florida
Please return all corre	spondence o	concerning this matter to the	following:		
Fed	erico D Car	vallo			
	<u></u>	N	ame of Person		<u> </u>
AR	ILAR GRO	UP, LLC			
<del></del>		F	irm/Company		
10	Enclave Ma	nor Dr			
_	· · · · ·		Address		<del> </del>
Sug	ar Land, Te	exas 77479			
		City/S	State and Zip Code		
feder	icocarvallo(	@yahoo.com			
<del></del>		E-mail address: (to be use	d for future annual	report not	ification)
For further information	n concernin	g this matter, please call:			
Federico D (	Carvallo		281 at (	630851	2
<del></del>	Name o	of Contact Person	Area Code	Day	time Telephone Number
MAILING ADDITION OF CO. Box 632 Tallahassee.	Corporations Section 27			Division Registrat Clifton B 2661 Exe	CADDRESS: of Corporations ion Section uilding coutive Center Circle see, FL 32301
Enclosed is a check fo		ring amount:  \$\sum \text{\$130.00 Filing Fee & Certificate of Status}\$	☐ \$155.00 Filir Certified Copy	ng Fee &	■ \$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:

'name unavailable, enter alternate	name adopted for the purpose of transacting business in Flo	orida. The alternate name must include "Limited Li	inbility Company," "L.L.C," or "LLC.")
TEXAS		3. <b>82-3797378</b>	
(Jurisdiction under the law of v	hich foreign limited liability company is organized)	(FEI nur	nber, if applicable)
N/A			
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration.) nine penalty liability)	
10 Enclave Manor Dr		6. 10 Enclave Manor Dr	<del>-</del> 1
(Street Address of	·	(Mailing Ad	
Sugar Land, Texas 77	479	Sugar Land, Texas 77479	<u></u>
. Name and street addre	ss of Florida registered agent: (P.O. Bo	x <u>NOT</u> acceptable)	
Name:	Registered Agents Inc.		- S <sub>S</sub> ω · · ·
			音音 <b>5</b>
	2020 N. B I., Daine Dr. CTE 1504		$\omega$ . $\omega$
Office Address:	3030 N. Rocky Point Dr., STE 150A		$\mathcal{S}^{\cdot,\cdot}$ $\boldsymbol{\omega}$
Office Address:	3030 N. Rocky Point Dr., STE 150A Tampa	. Florida 33607	Σ
egistered agent's acce loving been named as r esignated in this applic ocomply with the provis	Tampa  (City)  ptance: egistered agent and to accept service of ation, I hereby accept the appointment of accept solutions of all statutes relative to the proper	as registered agent and agree to ac	ed liability company at the place of in this capacity. I further ago
egistered agent's acce loving been named as r esignated in this applic ocomply with the provis	Tampa  (City)  ptance: egistered agent and to accept service of ation, I hereby accept the appointment of	(Zip of process for the above stated limite as registered agent and agree to ac	ed liability company at the place of in this capacity. I further ago
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tegistered agent's acce laving been named as r esignated in this applic comply with the provi- nd accept the obligation 3. The name, title or cap	Tampa  ptance: egistered agent and to accept service of ation, I hereby accept the appointment of the sions of all statutes relative to the properties of my position as registered agent.	(Zip of process for the above stated limite as registered ugent and agree to act and complete performance of my	ed liability company at the place of in this capacity. I further ago or duties, and I am familiar with
degistered agent's acce laving been named as resignated in this applic to comply with the provising accept the obligation	Tampa  (City)  ptance: egistered agent and to accept service of ation, I hereby accept the appointment of sions of all statutes relative to the property of my position as registered agent.  (Registered agent's	(Zip of process for the above stated limite as registered ugent and agree to act and complete performance of my	ed liability company at the place of in this capacity. I further ago or duties, and I am familiar with
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Typed or printed name of signee

Corporations Section \*P.O.Box 13697 Austin, Texas 78711-3697



## Office of the Secretary of State

### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Arilar Group, LLC (file number 802876342), a Domestic Limited Liability Company (LLC), was filed in this office on December 06, 2017.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on August 17, 2018.





Rolando B. Pablos Secretary of State

TID: 10264

Dial: 7-1-1 for Relay Services Document: 831710160002

Phone: (512) 463-5555 Prepared by: SOS-WEB