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| (Re | questor's Name) | | |
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| (Ad | dress) | | |
| (Cit | y/State/Zip/Phon | e #) | |
| PICK-UP | WAIT | MAIL | |
| (Bu | siness Entity Nar | me) | |
| (Do | cument Number) | | |
| Certified Copies | _ Certificates | s of Status | |
| Special Instructions to Filing Officer: | | | |
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COVER LETTER

Registration Section

TO:

| | | Name of | Limited Liability Com | npany |
|----------------------------------|---|--|---|---|
| The enclosed " Existence, and | Application by Fo check are submitt | oreign Limited Liability Com ed to register the above refer | pany for Authorization enced foreign limited l | i to Transact Business in Florida," Certifica liability company to transact business in Fl |
| lease return a | II correspondence | concerning this matter to the | following: | |
| | GUSTAVO D | GONZALEZ | | |
| | | N | ame of Person | |
| | RON 343, LL | C . | | |
| | | F | irm/Company | |
| | 8318 COMMI | ERCE WAY UNIT 807 | | |
| | | | Address | |
| | MIAMI LAKI | ES, FL 33016 | | |
| | | City/S | State and Zip Code | |
| | lilimoli@yahoo | | | |
| | | E-mail address: (to be use | d for future annual rep | ort notification) |
| | | ng this matter, please call: | | |
| GUSTAVO D GONZALEZ | | at () | 9843267 | |
| | Name | of Contact Person | Area Code | Daytime Telephone Number |
| Divisi Regist P.O. I | ING ADDRESS on of Corporation tration Section Box 6327 passee, FL 32314 | | Dir Re _j Cli 260 | REET ADDRESS: vision of Corporations gistration Section ifton Building 61 Executive Center Circle llahassee, FL 32301 |
| | heck for the follow 15.00 Filing Fee | ving amount: 図 \$130.00 Filing Fee & Certificate of Status | □ \$155.00 Filing Fo Certified Copy | ec & S160.00 Filing Fee, Certificate of Status & Certified Copy |

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION (05.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA;

| | Limited Liability Company: must include "Limited | ed Liability Company," "L.L.C.," or "LLC.") | | |
|--|--|---|--|--|
| (II) name unavailable, enter alternate n. | ame adopted for the purpose of fransacting business in Flor | anda. The alternate name must include "Lamited Liability Company," "L.L.C." or "LLC.") | | |
| 2. DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) | | 3 61-1749797 | | |
| | | (FEI number, if applicable) | | |
| 4. 09/15/2018 | | | | |
| | (Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905; F.S. to determi | registration) the penalty liability) | | |
| 5 2301 COLLINS AVE | | | | |
| 5. 2301 COLLINS AVE # 343 (Street Address of Principal Office) MIAMI BEACH, FL 33139 | | 6. 8318 COMMERCE WAY UNIT 807 (Mailing Address) MIAMI LAKES, FL 33016 | | |
| | | | | |
| 7. Name and street addres | <u>s</u> of Florida registered agent: (P.O. Box | NOT acceptable) | | |
| | GUSTAVO D GONZALEZ | | | |
| Name: | | | | |
| Office Address: | 2301 COLLINS AVE #343 | <u></u> | | |
| | MIAMI BEACH | . Florida 33139 (Zip code) | | |
| Registered agent's accept | (City) | (Zip code) | | |
| 8. The name, title or capa <u>Title or Capacity:</u> | city and address of the person(s) who ha | as/have authority to manage is/are: Title or Capacity: Name and Address: | | |
| Memb / Kay | EVENATO DE CARTELLE ZA LA CARTE DE LA SALAN DE SALAN DE LA CARTELLE ZA LA CARTELL | | | |
| Hemb/Hay. | Hariana Avendario 2301 Colins Ale # 343 Hiam Black, H 3313 | <u> </u> | | |
| (Use attachments if necess | sary) | | | |
| 9. Attached is a certificate jurisdiction under the law of the translator must be su | of which it is organized. (If the certificate | duly authenticated by the official having custody of records in the is in a foreign language, a translation of the certificate under oa | | |
| | | 3 (1) (b). Florida Statutes. I am aware that any false information iro. degrae felony as provided for in s.817.155, F.S. | | |



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RON343, 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 FOURTH DAY OF SEPTEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RON343, LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF OCTOBER, A.D. 2014.

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



5631852 8300 SR# 20186481835 Authentication: 203356935

Date: 09-04-18