M1800008655

(Requestor's I	Name)
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(Business En	tity Name)
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EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 13, 2018

KAYLAN WALDEN 212 W INTENDENCIA ST PENSACOLA, FL 32502

SUBJECT: BLUE BREEZE PROPERTIES, LLC

Ref. Number: W18000073467

We have received your document for BLUE BREEZE PROPERTIES, 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):

You failed to make the correction(s) requested in our previous letter.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

rEnclosed

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.

Brittany M Figueroa Regulatory Specialist II Registration/Qualification Section

Letter Number: 918A00016737

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COVER LETTER

eun irea.	Blue Breeze Prop	erties, LLC					
SUBJECT:	Name of Limited Liability Company						
				ation to Transact Business in Flori ited liability company to transact b			
Please return	all correspondence	concerning this matter to the	e following:				
	Kaylan Walde	n					
		N	lame of Person	· · · · · · · · · · · · · · · · · · ·			
	Liberis Law Fi	rm					
	Firm/Company						
	212 W. Intendencia St.						
	Address						
	Pensacola, FL 32502						
	City/State and Zip Code						
	kwalden@liberi	slaw.com					
		E-mail address: (to be use	d for future annua	l report notification)	<u> </u>		
For further in	nformation concernin	g this matter, please call:					
Ka	ylan Walden		850	438-9647			
	Name o	of Contact Person	at (Area Code	Daytime Telephone Number	er 		
Div Reg P.O	ision of Corporations gistration Section b. Box 6327 lahassee, FL 32314			STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
	i check for the follow \$125.00 Filing Fee	ing amount: □ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Fili 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 TAMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	ame adopted for the purpose of transacting business in Flor	rida. The altern	iate name must include "Limited Liabilit	y Company," '	LL,C, or "1.
Wyoming		3	(FEI number,		
(Jurisdiction under the law of w	high foreign limited liability company is organized)		(FE) number,	if applicable)	
	(Due for Louiseted burgers, in Florida of prive to	maretentian V	- 		53
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determi				(/)
8C 3rd Street SE (Street Address of F	3	6. <u>P</u>	O Box 4372 (Mailing Address		<u> </u>
Fort Walton Beach, F	•	F	ort Walton Beach, Fl. 325		2⊎
-				٠,	
					<u></u>
Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acc	eptable)		կ։ 0Ն
Name:	Liberis Law Firm	··· <u>-</u>		••	C.
Office Address:	212 W. Intendencia St.				
	Pensacola		, Florida 32502		
	(City)		(Zip code)		
	(Regulared ment's	i.mature)			
	(Registered agent's	-			
. The name, title or capa <u>Title or Capacity:</u>	(Registered agent's acity and address of the person(s) who has Name and Address:	s/have au	_	Name an	d Address
•	acity and address of the person(s) who ha Name and Address: Daniel Upshaw	s/have au		Name an	d Address
Title or Capacity:	acity and address of the person(s) who ha Name and Address:	s/have au Title		Name an	d Address
Title or Capacity:	ncity and address of the person(s) who has Name and Address: Daniel Upshaw PO Box 4372	s/have au Title		Name and	d Address
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Title or Capacity:	Daniel Upshaw PO Box 4372 Ft. Walton Beach, Fl. 32549	s/have au Title		Name an	d Address
Title or Capacity: Manager Use attachments if neces Attached is a certificate prisdiction under the law	Daniel Upshaw PO Box 4372 Ft. Walton Beach. Fl. 32549 sary) of existence, no more than 90 days old, of which it is organized. (If the certificat	S/have authors.	enticated by the official havin	ng custody	v of record
Title or Capacity: Manager Use attachments if neces	Daniel Upshaw PO Box 4372 Ft. Walton Beach. Fl. 32549 sary) of existence, no more than 90 days old, of which it is organized. (If the certificat	S/have authors.	enticated by the official havin	ng custody	v of record
Title or Capacity: Manager Use attachments if neces Attached is a certificate or is diction under the law of the translator must be second. This document is executed.	Daniel Upshaw PO Box 4372 Ft. Walton Beach. Fl. 32549 sary) of existence, no more than 90 days old, of which it is organized. (If the certificat	duly auther is in a fo	enticated by the official having reign language, a translation	ng custody of the ce	y of record rtificate un
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STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Blue Breeze Properties, LLC

is a

Limited Liability Company

formed or qualified under the laws of Wyoming did on **June 28, 2018**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2018-000810071**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 14th day of September, 2018 at 9:45 AM. This certificate is assigned 027937230.

Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.