## M18000010995

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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N CULLIGANI DEC 6 2018 COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Sunset Technology Center UC 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:			
Gustava Rudnique Z  Name of Person			
Tax House Many Firm/Company			
BOINE 79Th ST #2			
miami FC 33138  City/State and Zip Code			
Jacqui @ taxhavaemiemi. Com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Tacqueline Rusado at (786) 615 2009  Name of Contact Person Area Code Daytime Telephone Number			
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301			
Enclosed is a check for the following amount:  \$125.00 Filing Fee \$\Bigcup \$130.00 Filing Fee & \$\Bigcup \$155.00 Filing Fee & \$\Bigcup \$160.00 Filing Fee, Certificate    7-10 Business  Certificate of Status			

November 30, 2018

GUSTAVO RODRIGUEZ TAX HOUSE MIAMI 301 NE 79TH ST #2 MIAMI, FL 33138

SUBJECT: SUNSET TECHNOLOGY CENTER LLC

Ref. Number: W18000103714

We have received your document for SUNSET TECHNOLOGY CENTER LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

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) 245-6052.

Letter Number: 018A00024441

Neysa Culligan Regulatory Specialist II

www.sunbiz.org

## 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:

SUNSET TECHNOLOGY SERVICE CENTER	LLC
(Name of Foreign Limited Liability Company; must include "Limited	d Liability Company," "L.L.C.," or "LLC.")
If name unavailable, enter alternate name adopted for the purpose of transacting business in Flor	ida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")
2. New Jersey (Jurisdiction under the law of which foreign limited liability company is organized)	3. 46-5112.867 (FEI number, if applicable)
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4.	
(Date first transacted business in Florida, if prior to r (See sections 605,0904 & 605,0905, F.S. to determine	registration, ne penalty liability)
5. 4511 Why York Adenue (Street Address of Principal Office)	6. SOI NE 79 III SI 22
Union City NJ 07087	miemi Fc 33/3 &
	三 三
7. Name and street address of Florida registered agent: (P.O. Box	
Name: Gustavo Rodriguez	- dr.
Name: Gustavo Rodriguez  Office Address: 301 NE 79Th ST #	2
Hiemi	, Florida <u>33138</u> 3
(City)	Zip code)
to comply with the provisions of all statutes relative to the proper and accept the obligations of my position as registered agent.    1	/
8. The name, title or capacity and address of the person(s) who ha <u>Title or Capacity:</u> <u>Name and Address:</u>	Title or Capacity: Name and Address:
President Alexis Afrilano	
4511 Newyork Av	
White Copy Po 570	<u> </u>
(Use attachments if necessary)	<del></del> -
9. Attached is a certificate of existence, no more than 90 days old, of jurisdiction under the law of which it is organized. (If the certificate of the translator must be submitted)	duly authenticated by the official having custody of records in the e is in a foreign language, a translation of the certificate under oath
10. This document is executed in accordance with section 605.0203 submitted in a document to the Department of State constitutes a thi	
Signature	of an authorized person

## STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

## SUNSET TECHNOLOGY SERVICE CENTER LLC 0450252857

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on March 20, 2018.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

ALEJANDRO C ATILANO 1407 WEST ST UNION CITY, NJ 07087



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 4th day of December, 2018

Elizabeth Maher Muoio State Treasurer

Certificate Number: 6093295116

Yerify this certificate online at

https://www1.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp