

Division of Corporations

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Florida Department of State
Division of Corporations
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Email Address: DANIMARIE@LVDSPACES.COM

Foreign Limited Liability Company
LVD SPACES LLC

Certificate of Status	1
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 DEC 17 AM 6:52

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

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

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. NEW YORK 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. N/A
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 4931 BONITA BAY BLVD #501, BONITA SPRINGS, FL 34134

(Street Address of Principal Office)

6. 4931 BONITA BAY BLVD #501, BONITA SPRINGS, FL 34134

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: DANIELLE GLICKSON

Office Address: 4931 BONITA BAY BLVD #501

BONITA SPRINGS, Florida 34134
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

D. Glickson
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

DANIELLE GLICKSON-MEMBER- 4931 BONITA BAY BLVD #501, BONITA SPRINGS, FL 34134

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)

D. Glickson
Signature of an authorized person

This document is executed in accordance with section 605.0203 (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.

DANIELLE GLICKSON
Typed or printed name of signer

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State of New York Department of State } ss:

I hereby certify, that LVD SPACES LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 10/25/2016, and that the Limited Liability Company is existing so far as shown by the records of the Department.

I further certify, that no other documents have been filed by such Limited Liability Company.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 13th day of December
two thousand and eighteen.*

Whitney Clark
Deputy Secretary of State

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