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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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SECHELARY OF STATE

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COVER LETTER

TO:

то:	Registration Section Division of Corporations
SUBJI	3 Mile LLC
SOBJI	Name of Limited Liability Company
The en Exister	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ce, 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:
	Victor Saizarbitoria
	Name of Person
	Inaki Saizarbitoria, Esq., P.A.
	Firm/Company
	21 SW 15th Road, Suite 200
	Address
	Miami, FL 33129
	City/State and Zip Code
	Info@Inakilaw.com
	E-mail address: (to be used for future annual report notification)
For fu	ther information concerning this matter, please call:
	Victor Saizarbitoria 305 3744106 at ()
	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
Enclos	ed is a check for the following amount: \$\Begin{array}{ c c c c c c c c c c c c c c c c c c c

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

IN COMPILANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TIMITED ITABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

e unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	orida. The alternate name	must include "Limited Liability Company," "L.L.C," or "LLC"
elaware		3.	(FEI number, if applicable)
Jurisdiction under the law of w	nch foreign limited liability company is organized)	<u></u>	(FEI number, if applicable)
	Date first transacted business in Florida, if prior to	- marketing)	
	(See sections 605 0904 & 605 0905, F.S. to determ	nine penalty liability)	
2350 Coral Way			oral Way
(Street Address of I	Principal Office)	0	(Mailing Address)
Unit 401		Unit 40	1
	ss of Florida registered agent: (P.O. Bo		FL 33145
Name and <u>street addres</u>	ss of Florida registered agent: (P.O. Bo. Victor Saizarbitoria		
Miami, FL 33145 Name and street address Name: Office Address:			
Name and <u>street addres</u> Name:	Victor Saizarbitoria 21 SW 15th Road, Suite 200	x <u>NOT</u> acceptab	le)
Name and <u>street addres</u> Name:	Victor Saizarbitoria 21 SW 15th Road, Suite 200	x <u>NOT</u> acceptab	

MGR	Tassanee Vancouver	
	836 Wilton Way Drive	
	Plant City, FL 33563	
		-
e attachments if necessary)		
	e, no more than 90 days old, duly authenticated by the official having custody o s organized. (If the certificate is in a foreign language, a translation of the certi-	
This document is executed in acconitted in a document to the Departi	rdance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false ment of State constitutes a third degree felony as provided for in s.817.155, F.S.	informatio
	1/	



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "3 MILE 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 NINETEENTH DAY OF DECEMBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "3 MILE LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF NOVEMBER, A.D. 2018.

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



Authentication: 204141040

Date: 12-19-18