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(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
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Cartified Capies Cartificates of Status					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
2821 W18-96718					

Office Use Only



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November 2, 2018

SANTINO VIVANO B&B MANAGEMENT SERVICES, LLC 6458 WEST SAMPLE ROAD CORAL SPRINGS, FL 33067

SUBJECT: B&B MANAGEMENT SERVICES, LLC

Ref. Number: W18000096718

We have received your document for B&B MANAGEMENT SERVICES, 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):

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.

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) 245-6050.

Letter Number: 618A00022699

Shelia H Young Regulatory Specialist II

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	B&B MANAGEMENT SERVICES, LLC				
Name of Limited Liability Company					
The end Existen	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certifical and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.	te of rida.			
Please	turn all correspondence concerning this matter to the following:				
	SANTINO VIVIANO				
	Name of Person				
	B&B MANAGEMENT SERVICES, LLC				
Firm/Company					
6458 WEST SAMPLE RD					
Address					
CORAL SPRINGS, FL 33067					
	City/State and Zip Code				
	STINOVIV@YAHOO.COM				
	E-mail address: (to be used for future annual report notification)				
For furt	er information concerning this matter, please call:				
	SANTINO VIVIANO 954 650-5892 at ()				
	Name of Contact Person Area Code Daytime Telephone Number				
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingΓallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301				
Enclose	is a check for the following amount: \$\mathbb{B}\$125.00 Filing Fee \(\mathbb{D} \) \$\mathbb{S}\$130.00 Filing Fee \(\mathbb{C} \) Certificate of Status \$\mathbb{C}\$ Certified Copy \$\mathbb{C}\$ Status \(\mathbb{C}\$ Certified Copy \$\mathbb{C}\$ Status \(\mathbb{C}\$ Certified Copy				

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

IN COMPILANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

COM ANTIOTICANACTI	DOMNESS IN THE STATE OF FLORIDA:		
1. B&B MANAGEMEN	VT SERVICES, LLC		
	n Limited Liability Company; must include "Limite	d Liability Company," "L.L.C.," or "LLC.")	<u> </u>
B&B MANAGEMENT			
	rname adopted for the purpose of transacting business in Flo		ility Company," "L.L.C." or "ELC.")
2. DELAWARE	which foreign limited liability company is organized)	3. N/A	
	which foreign intaled habitity company is organized)	(rei numo	er, if applicable)
4. AUGUST 23, 2018			
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration.) ine penalty liability)	
5. 6458 WEST SAMPL		6. 6458 WEST SAMPLE RD	
(Street Address o BUILDING 7	(Principal Office)	(Mailing Addre	(8/8)
	21.22072	BUILDING 7	
CORAL SPRINGS, F	L 33067	CORAL SPRINGS, FL 330	67 <u> </u>
			F
7. Name and street address	ess of Florida registered agent: (P.O. Box		4
Name:	6458 WEST SAMPLE RD	ntho Viviano	22
0.00	BUILDING 7		7
Office Address:	BOILDING /		5E
	CORAL SPRINGS	, Florida <u>33067</u>	<u> </u>
designated in this applic to comply with the provi	registered agent and to accept service of j ation, I hereby accept the appointment a sions of all statutes relative to the proper ns of my position as registered agent. (Registered agent's	s registered agent and agree to act i and complete performance of my d	n this capacity. I further agree
	-		
8. The name, title or cap <u>Title or Capacity:</u>	pacity and address of the person(s) who have and Address:		NY 1.4.11
		Title or Capacity:	Name and Address:
OWNER	SANTINO VIVIANO		
	6458W SAMPLE RD CORAL SPRINGS	<u>.</u>	
	common miles		
	<u>FL_33067</u>		
		•	
/II t : c		-	
(Use attachments if nece			
9. Attached is a certificate	ssary)		
jurisdiction under the law	e of existence, no more than 90 days old, of which it is organized. (If the certificat	duly authenticated by the official have is in a foreign language, a translation	ring custody of records in the on of the certificate under oath
jurisdiction under the law of the translator must be s 10. This document is exe	e of existence, no more than 90 days old, of which it is organized. (If the certificat	e is in a forcign language, a translation of the second of	on of the certificate under oath
jurisdiction under the law of the translator must be s 10. This document is exe	e of existence, no more than 90 days old, of which it is organized. (If the certificat submitted)	e is in a forcign language, a translation of the second of	on of the certificate under oath



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

DELAWARE, DO HEREBY CERTIFY "B&B MANAGEMENT SERVICES, 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 TWENTY-SEVENTH DAY OF NOVEMBER, A.D. 2018.



Authentication: 203969848

Date: 11-27-18

Date of this notice: 08-30-2018

Employer Identification Number:

83-1750457

Form: SS-4

Number of this notice: CP 575 G

B&B MANAGEMENT SERVICES SANTINO K VIVIANO SOLE MBR 6458 W SAMPLE RD CORAL SPRINGS, FL 33067

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 83-1750457. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

A limited liability company (LLC) may file Form 8832, Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- * Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

Your name control associated with this EIN is B&BM. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.

(IRS USE ONLY) 575G 08-30-2018 B&BM O 9999999999 SS-4

Keep this part for your records. CP 575 G (Rev. 7-2007)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 G

999999999

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 08-30-2018 EMPLOYER IDENTIFICATION NUMBER: 83-1750457
FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE CINCINNATI OH 45999-0023 Tabalah dalah kadalah kadhasi kan kadalah dalah s

B&B MANAGEMENT SERVICES SANTINO K VIVIANO SOLE MBR 6458 W SAMPLE RD CORAL SPRINGS, FL 33067