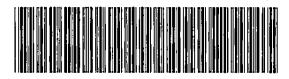
M19000001454

(Re	questor's Name)	
(Ad	dress)	-
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



100324181791

02/04/19--01021--022 **125.00

FILED

19 FEB -5 AN 2: 23

SECRETARY OF STATE
FALLANASSEE FLORINA

O SIMMONE FEB 1 1 2019

COVER LETTER

TO: Registration Section

Div	ision of Corporations	i e e e e e e e e e e e e e e e e e e e	
SUBJECT:	Bellezza & Associat	tes, LLC	
		Name of Limited Liability Company	
		ign Limited Liability Company for Authorization to Transact Business in Florida." Certi to register the above referenced foreign limited liability company to transact business in	
Please return	all correspondence co	oncerning this matter to the following:	
	Anthony Belleza	za	
		Name of Person	
	Bellezza & Asso	ociates, LLC	
	Firm/Company		
	444 Sandman D	Drive	
		Address	
	Kure Beach, NO	C 28449	
		City/State and Zip Code	
	abellezza@verizo		
		E-mail address: (to be used for future annual report notification)	
For further in	nformation concerning	this matter, please call:	
Ant	thony Bellezza	717 329-7160 at ()	
	Name of	Contact Person Area Code Daytime Telephone Number	
Div Reg P.O	ision of Corporations distration Section Box 6327 lahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	losed is a check for the ase make check payable	e to: FLORIDA DEPARTMENT OF STATE	
	\$125.00 Filing Fee	S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, C Certified Copy of Status & Certified	

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTEN THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Fl	orida. The alternate name must include "Limited L	iability Company," "L.L.C," or "LLC
North Carolina		83-3063736	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	3	mber, if applicable)
No Business Conduc	cted prior to registration		
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	o registration) nine penalty liability)	
444 Sandman Drive		444 Sandman Drive	
(Street Address of F	Principal Office)	6. (Mailing Ac	ddress)
Kure Beach, NC 284	49	Kure Beach, NC 28449	
Name and <u>street addres</u> Name:	ss of Florida registered agent: (P.O. Bo Nicholas Bellezza	x <u>NOT</u> acceptable)	M 2: 23
Office Address:	4477 Sandner Drive		
	Sarasota	34243 , Florida	
	(City)	(Tip or	ode)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Anthony Bellezza Nicholas Bellezza Name: Manager Manager 444 Sandman Drive Address: _____ Member Sandman Drive Sarasota, FL 34243 Authorized ☐Authorized Kure Beach, NC 28449 Person Person Other____ Other Other_ Маладег Manager Address: _____ ☐ Member Address: Member Authorized Authorized Person Person Other___ Other__ Other Other___ Name: ______ Name: _____ Manager Member Address: ☐ Member Address: Authorized □ Authorized Person Person Other_____ Other___ Other____ Other___ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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) 10. 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.

Typed or printed name of signee

Anthony Bellezza



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

BELLEZZA & ASSOCIATES, LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 17th day of December, 2018

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger, or articles of conversion for said limited liability company.





Scan to verify online.

Certification# 103700099-1 Reference# 14929198- Page: 1 of 1 Verify this certificate online at http://www.sosne.gov/verification

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 10th day of January, 2019.

Elaine I Marshall

Secretary of State