

# M19000002356

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

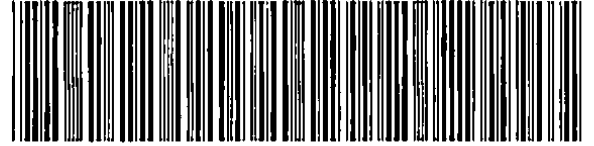
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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03/11/19--01005--018 \*\*125.00

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MAR 11 2019  
ALLIANCE SEC. FINANCIAL

3/12/19 QS

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Luxor Club Partners, LLC

- APR 11 2 33 PM '19  
FILED
- ☐ Art of Inc. File \_\_\_\_\_
  - ☐ LTD Partnership File \_\_\_\_\_
  - ☐ Foreign Corp. File \_\_\_\_\_
  - ☒ L.C. File \_\_\_\_\_
  - ☐ Fictitious Name File \_\_\_\_\_
  - ☐ Trade/Service Mark \_\_\_\_\_
  - ☐ Merger File \_\_\_\_\_
  - ☐ Art. of Amend. File \_\_\_\_\_
  - ☐ RA Resignation \_\_\_\_\_
  - ☐ Dissolution / Withdrawal \_\_\_\_\_
  - ☐ Annual Report / Reinstatement \_\_\_\_\_
  - ☐ Cert. Copy \_\_\_\_\_
  - ☐ Photo Copy \_\_\_\_\_
  - ☐ Certificate of Good Standing \_\_\_\_\_
  - ☐ Certificate of Status \_\_\_\_\_
  - ☐ Certificate of Fictitious Name \_\_\_\_\_
  - ☐ Corp Record Search \_\_\_\_\_
  - ☐ Officer Search \_\_\_\_\_
  - ☐ Fictitious Search \_\_\_\_\_
  - ☐ Fictitious Owner Search \_\_\_\_\_
  - ☐ Vehicle Search \_\_\_\_\_
  - ☐ Driving Record \_\_\_\_\_
  - ☐ UCC 1 or 3 File \_\_\_\_\_
  - ☐ UCC 11 Search \_\_\_\_\_
  - ☐ UCC 11 Retrieval \_\_\_\_\_
  - ☐ Courier \_\_\_\_\_

Signature \_\_\_\_\_

Requested by: Seth

03/11/19

Name

Date

Time

Walk-In

Will Pick Up

COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: Luxor Club Partners, LLC

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:

D. Randall Briley

Name of Person

Briley & Deal, LLC

Firm/Company

2215 S. Third Street, Suite 101

Address

Jacksonville Beach, FL 32250

City/State and Zip Code

emenor@fortfamilyinv.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

D. Randall Briley

904

285-5299

at ( )

Name of Contact Person

Area Code

Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

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:

1. Luxor Club Partners, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC")

2. Delaware  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. Applied For  
(D.U.I. number, if applicable)

4. will not conduct business until registration is accepted  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0901 & 605.0902, F.S., to determine penalty liability)

5. 8711 Perimeter Park Blvd., Suite 11  
(Street Address of Principal Office)

6. 8711 Perimeter Park Blvd., Suite 11  
(Mailing Address)

Jacksonville, FL 32216  
Jacksonville, FL 32216

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

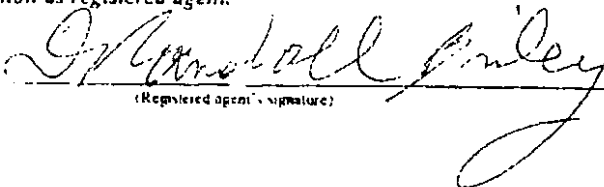
Name: D. Randall Briley

Office Address: 2215 S. Third Street, Suite 101

Jacksonville Beach  
(City) Florida 32250  
(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.

  
(Registered agent's signature)

FILED  
2019 JUN 11 9 57

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:**

☒ Manager Name: Donald C. Fort

☐ Member Address: 8711 Perimeter Park Blvd

☐ Authorized Suite 11

Person Jacksonville, FL 32216

☐ Other ☐ Other

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other ☐ Other

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other ☐ Other

**Title or Capacity:** **Name and Address:**

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other ☐ Other

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other ☐ Other

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

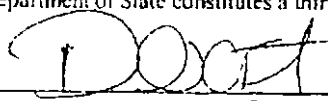
Person \_\_\_\_\_

☐ Other ☐ Other

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed 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.

  
 \_\_\_\_\_  
 Signature of an authorized person

Donald C. Fort

\_\_\_\_\_  
 Typed or printed name of signer

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "LUXOR CLUB PARTNERS, 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 FIFTH DAY OF MARCH, A.D. 2019.


FILED  
2019 MAR 11 P 7:33  
DELAWARE



7309460 8300

SR# 20191760286

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 202375593

Date: 03-05-19