

1119000002562

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

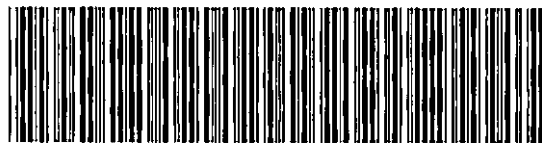
(Business Entity Name)

(Document Number)

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

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2019 MAR -11 AM 9:09  
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MAR 18 2019



420 Lincoln Road, Suite 357, Miami Beach FL, 33139 o: 305.489.9100, f: 786.216.7088, [www.bffilegal.com](http://www.bffilegal.com)

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

To Whom It May concern,

Please find enclosed:

- The application by 4ANDI, LLC (the "**Entity**"), a Foreign Limited Liability Company, for authorization to transact Business in Florida;
- The Entity's Certificate of Existence; and
- A check for \$125.00

Please, contact us should you have any question or concern.

Best Regards,

*Beatrice Bianchi Fasani*  
Beatrice Bianchi Fasani, Esq.

2019 MAR -4 AM 9:09

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

4AND1, LLC

**SUBJECT:**

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:

Beatrice Bianchi Fasani

Name of Person

BFF LEGAL.

Firm/Company

420 Lincoln Road, Suite 357.

Address

## Miami Beach

City/State and Zip Code

hbianchi@bftlegal.com

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

For further information concerning this matter, please call:

Beatrice Bianchi Fasani

305

489-9100

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. 4ANDL, 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.")  
DELAWARE

2. 83-3016812  
(Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)

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

480 NE 31st Street 420 Lincoln Road, Suite 357  
5. (Street Address of Principal Office) 6. (Mailing Address)

Miami FL, 33137 Miami Beach, Florida, 33139

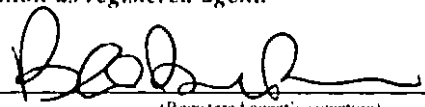
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: BFF MANAGEMENT SERVICES, INC  
Office Address: 420 Lincoln Road, Suite 357  
Miami Beach 33139  
(City) Florida (Zip code)

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FILED

Registered agent's acceptance:

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

 Director  
(Registered agent's signature)

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: Beatrice Bianchi Fasani  
420 Lincoln Road, Suite 357  
☐ Member Address: Miami Beach, FL 33139  
☐ Authorized  
Person  
☐ 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: Simon Misfud  
65 B'Kara Hill  
☐ Member Address: St Julian's, Malta  
☐ 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-  
excess individuals may be added to the index when filing your Florida Department of State Annual Report form.

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 a translator must be submitted)

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information  
provided 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

Beatrice Bianchi Fasani, Manager

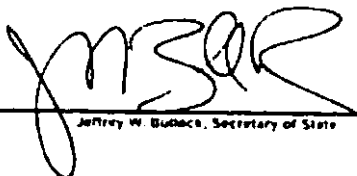
Typed or printed name of signee

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "4 ANDI 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-SIXTH DAY OF DECEMBER, A.D. 2018.

  
Jeffrey W. Bullock, Secretary of State

7203291 8300

SR# 20188263232

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

Authentication: 204177245

Date: 12-26-18