# M19000002983

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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March 16, 2019

J & E ACCOUNTING TAX SOLUTIONS LLC 7635 ASHLEY PARK CT, #503M ORLANDO, FL 32835

SUBJECT: ADB - AART DE BOER LTD. LLC

Ref. Number: W19000025617

We have received your document for ADB - AART DE BOER LTD. 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):

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$3623.75.

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) 245-6051.

Stacy Prather Regulatory Specialist III

Letter Number: 619A00005258

# **AFFIDAVIT**

# Subject: ADB - AART DE BOER LTD (LLC)

I hereby affirm that the aforementioned entity did not transact business in Florida prior to submission of the application of Authority to Transact Business in the State.

Signed by: PAUL CAMBRIA, Manager

Date: March 27, 2019

Paul Digitally signed by Paul

Cambria Cambria Date:

a 2019.03.27 10:10:03 -04'00'

Authorized Signature

Paul Cambria

# COVER LETTER

TO:

Registration Section

		f Limited Liability	Company
			zation to Transact Business in Florida," Certifica nited liability company to transact business in Flo
eturn all corresponde	nce concerning this matter to th	e following:	
Jaime Sar	ntiago, CPA		
<del></del>	}	Name of Person	
J&E Acco	unting Tax Solutions LLC		
<del></del>	ŀ	Firm/Company	
7635 Ashl	ey Park Ct #503m		
<del></del>	-	Address	
Orlando, F	FL 32835		
	Сіту/	State and Zip Coo	te
jaimesantia	gocpa@gmail.com		
	E-mail address: (to be us	ed for future annu	al report notification)
her information conce	erning this matter, please call:		
Paul Cambria		407	456-2764
Na	me of Contact Person	at ( Area Cod	: <del></del>
MAILING ADDRESS: Division of Corporations			STREET ADDRESS: Division of Corporations
Registration Section			Registration Section
P.O. Box 6327 Tallahassee, FL 323	14		Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
77 1 12 1 1	for the following amount:	TMENT OF ST	

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

IN COMPLIANCE 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:

	i Limited Liability Company, must include "Limited	Liability Company," "E.L.C.," or "ELC")		
(Uname snavadable, three alternate	name adopted for the purpose of transacting business in Flor	da 'The alternate name must include "Limited Liability Com	ърат, " "L. С." от "L.С.")	
Colorado		83-2948724		
2. Durisdiction under the law of v	which foreign limited hability company is organized)	3. (FEI number, if appl	heable)	
02/22/1969 4.			2019 HAR	-T]
	(Date first transacted business in Florida, if prior to n (See sections 605,0904 & 605 0905, F.S. to determin	gastration ) e penalty liability)	7. 2. 2. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.	
Registered Office:	Principal Office)	C/O Paul Cambria	7 PH	
(Street Address of	Principal Office)	(Mailing Address)	E. F. S. 5	
6547 N Academy Bl	vd #1101	6547 N Academy Blvd #1101	53 FL	
Colorado Springs, C	O 80918	Colorado Springs, CO 80918		
	ss of Florida registered agent: (P.O. Box  J&E Accounting Tax Solutions LLC	<u>NOT</u> acceptable)		
<ol> <li>Name and <u>street addre</u></li> <li>Name:</li> <li>Office Address:</li> </ol>		NOT acceptable)		
Name:	J&E Accounting Tax Solutions LLC	32835		
Name:	J&E Accounting Tax Solutions LLC 7635 Ashley Park Ct #503m			

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: Paul Cambria Manager Name: Manager Manager Name: \_\_\_ 6547 N Academy Blvd #1101 ■ Member Address: Member Address: \_ Colorado Springs, CO 80918 Authorized Authorized Person Person Other\_ Other\_\_\_ Other Other Manager Name: Manager Name: Member Member | Address: Address: Authorized Authorized Person Person Other Other\_ Other\_ Other Manager Name: \_ Manager Manager Name: ☐ Member ☐ Member Address: Address: \_ 3 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. Non-indexed individuals may be added to the index when tiling 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.

Paul Cambria				
	Signature of an authorized person			
Paul Cambria, Manager				
	70 1 1 1 1			

# OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

# CERTIFICATE OF FACT OF GOOD STANDING

I. Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

ADB - AART DE BOER LTD.

### is a

## Limited Liability Company

formed or registered on 12/28/2018 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20188036623.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 02/15/2019 that have been posted, and by documents delivered to this office electronically through 02/20/2019 @ 09:29:57.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 02/20/2019 @ 09:29:57 in accordance with applicable law. This certificate is assigned Confirmation Number 11401752



Secretary of State of the State of Colorado

Nonce: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us.biz/CertificateSearch/viteria-do-entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely aptional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us.chck//Businesses.trademarks/trade-names//and-select//Frequently Asked Questions.