# M19000003097

(Re	equestor's Name)	
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PICK-UP	MAIT WAIT	MAIL
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(Dx	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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### COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ	Unividoc L.L.C.				
SUDJ	EC1.	Name of Lim	ited Liability (	Company	-
The er Existe	nclosed "Application by Foreign nce, and check are submitted to	n Limited Liability Company register the above reference	y for Authoriza ed foreign limi	ntion to Transact Business in Florida, ted liability company to transact busin	" Certificate of ness in Florida.
Please	return all correspondence conc	cerning this matter to the foll	owing:		
	German Urrego				
		Name	of Person		-
	Unividoc L.L.C.				
		Firm/	Company	<del> </del>	-
	1301 W Lambert L	n - Suite # 10101			
		Ā	ddress		-
	Oro Valley, Arizon	па 85737			
		City/State	and Zip Code		_
	Unividoc@gmail.com	m			
	Ē.	-mail address: (to be used fo	r future annua	report notification)	-
For fu	rther information concerning th	nis matter, please call:			
	German Urrego	а	305 at (	4508763	
	Name of C	ontact 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 f Please make check payable t		ENT OF STA	TE	
		S130.00 Filing Fee & Certificate of Status	\$155.00	Filing Fee & S160.00 Filing of Status & Ce	

### 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:

Arizona (Jurisdiction under the law of which)						C.")	
(Jurisdiction under the law of which		83- 3.	0584260				
	foreign limited liability company is organized)	J		(FEI number, if applicable	)	-	
N/A							
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration.) une penalty habilit	y)				
713 SE 14th Pl Homestead			713 SE 14th Pl Homestead, Fl 33033				
(Street Address of Prince	ipal Office)	6		(Mailing Address)		-	
•						•	
						-	
Name and street address o	f Florida registered agent: (P.O. Box	NOT					
		( <u>NOL</u> accet	otable)				
	The state of the s	( <u>NOT</u> accep	otable)		٠		
	· · · · · · · · · · · · · · · · · · ·	K <u>NOT</u> accer	otable)		On to		
	angelica Harris	K <u>NOT</u> accep	otable)		ગુંધા છું		
A Name:		K <u>NOT</u> accep	mtable)		gara K.C.		
Name:	angelica Harris	C <u>NOT</u> accep	otable) —		9819 ELS 2		
Name:		C <u>NOT</u> accep	otable) —		9019 EED 21		
Name:	angelica Harris	C <u>NOT</u> accep			:2		
Name:	angelica Harris	C <u>NO I</u> accep	_	3033	21 P.1		
Name:	angelica Harris 13 SE 14th Pl	C <u>NOT</u> accep	_	3033 (Zin code)	:2		

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: Name: German Urrego Manager Name: Manager Address: \_\_\_\_ 1301 W Lambert Ln, # 10101 Member Member Address: Oro Valley, AZ, 85737 Authorized Authorized Person Person Other\_\_ Other\_\_\_\_ Other\_\_\_ Other\_\_\_ Name: \_\_\_\_\_ Name: \_\_\_\_\_ Manager Manager Address: \_\_\_\_\_ Member | Address: Member Authorized Authorized Person Person Other\_\_\_\_ Other Other Other\_ Manager Manager Name: Name: \_\_\_\_\_ Member Member Address: Address: \_\_\_ Authorized Authorized Person Person 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. Signature of an authorized person

Typed or printed name of signee

German Urrego

# STATE OF ARIZONA



## Office of the CORPORATION COMMISSION

### CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

#### UNIVIDOC L.L.C.

ACC file number: L22569604

was incorporated under the laws of the State of Arizona on 02/02/2018, and that, according to the records of the Arizona Corporation Commission, said limited liability company is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



IN WITNESS WHEREOF. Thave hereunto set my hand, atfixed the official seal of the Arizona. Corporation Commission, and issued this Certificate on this date: 03/20/2019

Matthew Neubert, Interim Executive Director



