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S. PRATHER

Kamal Cherkaoui 1106 N 46 Avenue Hollywood, FL 33021

Phone: 786-972-7646

Email: kamalcherkaoui@hotmail.com

March 28, 2019

Re: Elite Group MK, LLC

Document Number: W190000256207

Application To Conduct Business in Florida

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

To Whom It May Concern:

The enclosed Application To Conduct Business in Florida was submitted to the State on February 26, 2019. However, it was missing the Registered Agent's signature which was the only obstacle holding the Application.

Therefore, enclosed please find the Application which now has the Registered Agent's signature.

Please contact me (listed above) if you have any questions or need anything additional.

Sincerely,

Kamal Cherkaoui



March 16, 2019

KAMAL CHERKAOUI 1106 N. 46TH AVENUE HOLLYWOOD, FL 33021

SUBJECT: ELITE GROUP MK, LLC Ref. Number: W19000025620

We have received your document for ELITE GROUP MK, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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.

Letter Number: 219A00005259

Stacy Prather Regulatory Specialist III

www.sunbiz.org

COVER LETTER

TO:

ro:	Registration Section Division of Corporations				
~~~~	Elite Group MK, LLC				
SUBJE	ECT:	Name of Li	mited Liability C	опрану	
The en Exister	closed "Application by Foreignee, and check are submitted	gn Limited Liability Compa to register the above referen	ny for Authorizat ced foreign limite	ion to Trans d liability o	sact Business in Florida," Certificate of company to transact business in Florida
Please	return all correspondence cor	ncerning this matter to the fo	ollowing:		
	Kamal Cherkaoui				
		Nar	ne of Person		
		Fin	т/Сотрапу	<u> </u>	<del></del>
	1106 N. 46 Aven	ue		<del>, .</del>	
			Address		
	Hollywood, FL	33021			
		City/Stz	ite and Zip Code		
	kamalcherkaoui@l				
	<del></del>	E-mail address: (to be used	for future annual	report noti	fication)
For fu	rther information concerning	this matter, please call:			
	Kamal Cherkaoui		786 at (	972-764	
	Name of	Contact Person	Area Code	Dayt	ime Telephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of Registration Clifton Bu 2661 Exec	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301
Enclo	sed is a check for the following \$125.00 Filing Fee	ng amount:  \$\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\overline{\ov	S155.00 Filin	ng Fee &	☐ \$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:

ame unavailable, enter alternate	name adopted for the purpose of transacting business in Flor	ids. The alternate name must include "Limited	t Liability Company," "L.L.C," or "LLC.")
Arkansas		3. N/A	
	which foreign limited liability company is organized)		number, if applicable)
N/A			<del></del>
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine	registration.) ne pensity liability)	
1106 N. 46 Avenue		6. SAME	•
(Street Address of	Principal Office)	(Mailing	Address)
Hollywood, FL 3302	1		<u></u>
			<u> </u>
			A 70
Name and street addre	ess of Florida registered agent: (P.O. Box	NOT acceptable)	AHA -
vanic and sacce admix		<u> </u>	A -
Name:	Kamal Cherkaoui		
OFF - 4 13 -	1106 N. 46 Avenue		المصحط تكريناً
Office Address:			
	Hollywood	, Florida <u>33021</u>	<b>3</b>
ignated in this applic comply with the provi	ration, I hereby accept the appointment a sions of all statutes relative to the proper as of my position as registered agent.	and complete performance of t	act in this capacity. I further
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# Arkansas Secretary of State John Thurston

State Capitol Building ♦ Little Rock, Arkansas 72201-1094 ♦ 501-682-3409

# **Certificate of Good Standing**

I, John Thurston, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

### **ELITE GROUP MK LLC**

authorized to transact business in the State of Arkansas as a Limited Liability Company, filed Articles of Organization in this office April 3, 2017.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 25th day of February 2019.

John Thurston Secretary of State

Online Certificate Authorization Code: f8530f2384c31c4
To verify the Authorization Code, visit sos.arkansas.gov

m Thurston

Thank you. Your payment is complete. Your account will be charged by Arkansas GovPay - Arkansas Government Services.

This certificate is available for 48 hours at the following location:

## View the Certificate of Good Standing for ELITE GROUP MK LLC

This is your official certificate; a copy will NOT be physically mailed. This document includes an authorization code at the bottom to prove validity.

# **Payment Summary**

Amount Paid:	\$25.00
Arkansas.gov Total:	\$28.00
Payment Status:	Complete
Order Date/Time:	02/25/2019 05:29 PM
Confirmation Number (Order Id):	20190225172933497
Name on card:	Lucinda Paxton
Email Address:	cinpax@att.net
Phone Number:	7862186025
Billing Address:	1005 NE 34 Avenue, 101 Homestead, FL 33033, UNITED STATES

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	#101 Homestead, FL 33033-5344	Feb. 26,201.	A.
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