# 11900005430

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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Sam from the SS

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### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 24, 2019

ALINE DARMOUNI 44 W FLAGLER ST., STE 2300 MIAMI, FL 33130

SUBJECT: AIELLO ROSARIO INVEST LLC

Ref. Number: W19000050675

We have received your document for AIELLO ROSARIO INVEST 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):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

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) 245-6052.

Brooke N Kinsey Regulatory Specialist II

Letter Number: 019A00010599

#### COVER LETTER

A SUBJECT:	IELLO ROSARIO	INVEST LLC	_			_
		Name (	of Limited Li	bility	Company	
					ation to Transact Business in Florida ited liability company to transact bus	
lease return all	l correspondence co	neerning this matter to t	he following:			
	ALINE DARMO	ואטי				
			Name of Pers	on -		_
	EXCO US ATRI	UM				
		·····	Firm/Compa	ıy	<u></u>	
	44 W FLAGLER	ST - SUITE 2300				
			Address			<del></del>
	MIAMI FL-3313	0				
		City	/State and Zig	Code		
	office@excous.com	n				
		E-mail address: (to be us	sed for future	annua	report notification)	-
or further infor	mation concerning	his matter, please call:				
Aline I	DARMOUNI		305 at (		600 4405	
	Name of	Contact Person		Code	Daytime Telephone Number	- '== ;
Divisio Registr P.O. Bo	ING ADDRESS: n of Corporations ation Section ox 6327 ssee, FL 32314				STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	5 5 60 60 60
	ed is a check for the nake check payable	following amount: to: FLORIDA DEPAR	RTMENT OF	STA'	те	
	25.00 Filing Fee	S130.00 Filing Fee Certificate of S	.e. 🗆 s	55.00	Filing Fee & S160.00 Filing ed Copy of Status & Ce	

## **RECEIVED**

JUN 0 3 2019

## 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 STATEOF FLORIDA:

f name unavailable, enter alternate	name adopted for the purpose of transacting business in Flo	ida. Die alternate name must incluc	e "Limited Liability Company	r," "L. L. C," or "L.I. C.
MICHIGAN	•	81-4839329		
	vhich toreign limited hability company is organized)	3.	(FEI number, if applicable	
(This bold from the same of the	rated to reign annued finding continuity to organize of		(тт. пиност, и аррасаю	ic)
05/03/2019				
	(Date first transacted business in Florida, if prior to	egistration )		
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605 0905, F.S. to determ	e penalty liability)		
44 W FLAGLER ST		44 W FLAGLER	ST - SUITE 2300	
(Street Address of	Principal Office)	6	(Mailing Address)	
MIAMEEL-33130		MIAMUFL-3313	0	
			··	
				nić.
Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)		. bruć
Name and street address	ss of Florida registered agent: (P.O. Box	<u>NOT</u> acceptable)		9919 25
	ss of Florida registered agent: (P.O. Box  EXCO US ATRIUM	<u>NOT</u> acceptable)		500 June -
Name and street address Name:				5814 Tr 5
	EXCO US ATRIUM			paig Jen La Comment
	EXCO US ATRIUM			14 1. bib6
Name:	EXCO US ATRIUM  44 W FLAGLER ST - SUITE 2300		3130	98 14 Jun 20 10 61 85

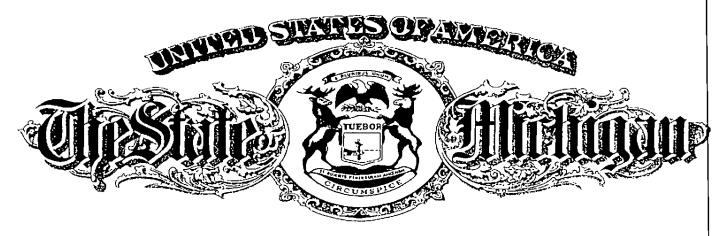
#### Registered agent's acceptance:

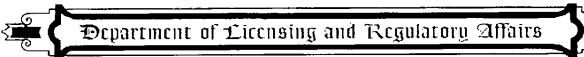
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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)

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: Rosario AIELLO Name: \_ Maria AIELLO Manager Manager 44 W FLAGLER ST 44 W FLAGLER ST Member Member Member Address: SUITE 2300 **SUITE 2300** Authorized Authorized MIAMLEL - 33130 MIAMI FL - 33130 Person Person []Other\_ Other\_\_\_\_ Other\_ Other\_\_\_\_ Manager Name: \_\_\_\_\_ Manager Name: \_\_\_\_\_ Member Address: Member | Address: Authorized Authorized Person Person Other Other\_\_\_\_ Other Other\_ Name: \_\_\_\_\_ Manager Manager Manager Name: ☐ Member Address: Member Address: []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. 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





Lansing, Michigan

This is to Certify That AIELLO ROSARIO INVESTILLO

was validly authorized on January 11, 2017, as a Michigan DOMESTIC LIMITED LIABILITY COMPANY. and said limited liability company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23 to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by electronic transmission

Certificate Number: 19052549630

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 3rd day of May, 2019.

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau