

M19000005824

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

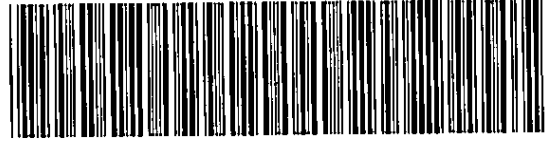
Special Instructions to Filing Officer:

W19000050384

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Office Use Only



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FILED

Z BROWN

JUN 14 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 23, 2019

JUSTIN M. MOWITZ
5341 SW 91ST TERR, STE A
GAINESVILLE, FL 32608 US

SUBJECT: TARA ESTATES, LLC
Ref. Number: W19000050384

We have received your document for TARA ESTATES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as or not distinguishable from the name of a voluntarily dissolved business entity. This name is not available for the assumption or use by another entity for 120 days after the effective date of the dissolution. The dissolved business entity may provide the Department of State with an affidavit or letter, releasing the name for use to you and affirming they have no intention of revoking the dissolution or you may adopt an alternate name for use in Florida. If you choose to adopt an alternate name, please enter that name in the space provided in number one of the application.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Zakiya M Brown
Regulatory Specialist II

Letter Number: 819A00010521

May 31, 2019

Florida Department of State
Division of Corporations

Attn: Zakiya Brown

Re: Tara Estates, LLC, Ref. number: W19000050384

Dear Ms. Brown:

Please accept this letter for the purposes of establishing Tara Estates, LLC, a Delaware limited liability company, for purposes of authorizing Tara Estates, LLC to transact business in the State of Florida. I am the authorized member of the now-dissolved Florida limited liability company of the same name, Tara Estates, LLC (L19000042563), which was dissolved at my direction by my authorized agent, Justin M. Mowitz, Esq., under articles of dissolution filed on April 29, 2019. On behalf of the dissolved Florida entity, Tara Estates, LLC, as its authorized member, I do hereby authorize the release of the name Tara Estates, LLC to be used by the Delaware LLC of the same name, and do also hereby affirm that I have no intention of revoking the dissolution filed on April 29, 2019. Please allow Tara Estates, LLC, (the Delaware entity) to use the name and complete its "Application by a Foreign Limited Liability Company for Authorization to Transact Business in Florida."

Tara Estates, LLC, a dissolved Florida limited liability company.

By:

Sayed Moukhtara

Its: Authorized Member

Real Estate, Business,
Wills & Trusts, Gun Trusts
5341 SW 91st Terrace Suite A
Gainesville, FL 32608



Phone: 352-533-5035
Fax: 352-533-5493
www.mowitztitle.com
Email: closings@mowitztitle.com

May 14, 2019

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Tara Philly and Tara Estates

To Whom It May Concern:

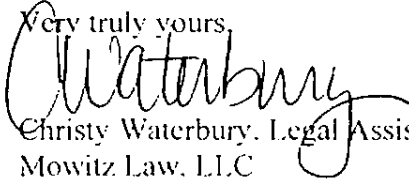
Enclosed herewith are the following:

- [X] Good Standing Certificate for Tara Philly, LLC, a Delaware limited liability company
- [X] Good Standing Certificate for Tara Estates, LLC, a Delaware limited liability company

We were notified that you would need these forms to complete the authorization for foreign entities to transact business in the State of Florida.

Please feel free to reach out to me if there are any questions or additional items needed.

Very truly yours,


Christy Waterbury, Legal Assistant
Mowitz Law, LLC
Enclosures

2019 MAY 17 10:11:29

COVER LETTER

TO: Registration Section
Division of Corporations

Tara Estates, LLC, a Florida limited liability company

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:

Justin M. Mowitz, Esq.

Name of Person

Mowitz Law, LLC

Firm/Company

5341 SW 91st Terrace, Suite A

Address

Gainesville, FL 32608

City/State and Zip Code

justin@mowitztitle.com

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

For further information concerning this matter, please call:

Justin M. Mowitz

352

533-5035

Name of Contact Person

at (_____) _____

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. Tara Estates, 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.")

2. Delaware Applied For
(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)

5. 251 Little Falls Drive 7717 NW 20th Lane
(Street Address of Principal Office) 6. (Mailing Address)
Wilmington, DE 19808 Gainesville, FL 32605

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

Name: Justin M. Mowitz, Esq/Mowitz Law, LLC
Office Address: 5241 SW 91st Terrace, Suite A
Gainesville 32608
(City) Florida (Zip code)

FILED
JUN 14 AM 3:20
JUN 14 2014
JUN 14 2014

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:**

☐ Manager Name: Sayed Mouhktara
☒ Member Address: 7717 NW 20th Lane
☐ Authorized Gainesville, FL 32605
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: Justin M. Mowitz
☐ Member Address: 5341 SW 91st Terrace, Suite A
☒ Authorized Gainesville, FL 323608
Person
☐ Other ☐ Other

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person
☐ Other ☐ Other

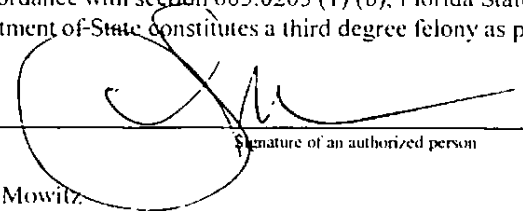
☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person
☐ Other ☐ Other

FILED
JUN -4 AM 3:20

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 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
Justin M. Mowitz

Typed or printed name of signer

STATE OF DELAWARE
CERTIFICATE OF FORMATION
OF LIMITED LIABILITY COMPANY

The undersigned authorized person, desiring to form a limited liability company pursuant to the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

1. The name of the limited liability company is TARA ESTATES LLC

2. The Registered Office of the limited liability company in the State of Delaware is located at 251 Little Falls Drive (street),
in the City of Wilmington, Zip Code 19808. The
name of the Registered Agent at such address upon whom process against this limited
liability company may be served is Corporation Service Company

By: _____

Authorized Person

Name: _____

Print or Type

Delaware

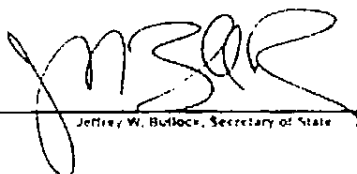
The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TARA ESTATES 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 THIRTEENTH DAY OF MAY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TARA ESTATES LLC" WAS FORMED ON THE ELEVENTH DAY OF APRIL, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



Jeffrey W. Bullock, Secretary of State

7370109 8300

SR# 20193805025

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202810956

Date: 05-13-19