

1119000006658

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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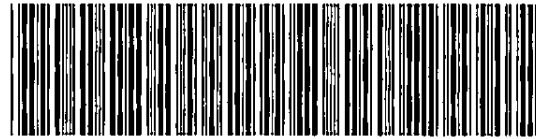
(Business Entity Name)

(Document Number)

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JUL 26 2019 PM 3:39  
TALLAHASSEE, FLORIDA

D. BRUCE  
JUL 11 2019

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: COAST AUTONOMOUS LLC

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:

AIMIE NGHIEM

Name of Person

COAST AUTONOMOUS LLC

Firm/Company

23 E COLORADO BLVD, SUITE 203

Address

PASADENA, CA 91105

City/State and Zip Code

INFO@COASTAUTONOMOUS.COM

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

For further information concerning this matter, please call:

AIMIE NGHIEM

626

838-2469

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

FILED  
2013 JUN 26 PM 3:29  
TALLAHASSEE, FLORIDA

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. COAST AUTONOMOUS 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. CALIFORNIA

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 82-0981945

(FEI number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0903 & 605.0905, F.S., to determine penalty liability)

5. 23 E COLORADO BLVD

(Street Address of Principal Office)

6. 23 E COLORADO BLVD

(Mailing Address)

SUITE 203

SUITE 203

PASADENA, CA 91105

PASADENA, CA 91105

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

Name: Northwest Registered Agent LLC

Office Address: 7901 4th St N STE 300

St. Petersburg

(City)

Florida 33702

(Zip code)

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.

Tom Glover

(Registered agent's signature)

FILED  
2016 JUN 26 PM 3:33  
CLERK OF CIRCUIT COURT  
IN AND FOR THE COUNTY OF PASADENA  
FLORIDA

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]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
Manager	Name: <u>DAVID HICKEY</u>	Manager	Name: <u>ADRIAN SUSSMANN</u>
Member	Address: _____	Member	Address: _____
Authorized	<u>23 E COLORADO BLVD, SUITE 203</u>	Authorized	<u>23 E COLORADO BLVD, SUITE 203</u>
Person	<u>PASADENA, CA 91105</u>	Person	<u>PASADENA, CA 91105</u>
Other <u>CEO</u>	Other _____	Other <u>PRESIDENT</u>	Other _____
Manager	Name: <u>PIERRE LEFFVRE</u>	Manager	Name: <u>AIMIE NGHIEM</u>
Member	Address: _____	Member	Address: _____
Authorized	<u>23 E COLORADO BLVD, SUITE 203</u>	Authorized	<u>23 E COLORADO BLVD, SUITE 203</u>
Person	<u>PASADENA, CA 91105</u>	Person	<u>PASADENA, CA 91105</u>
Other <u>CTO</u>	Other _____	Other <u>DIRECTOR</u>	Other _____
Manager	Name: _____	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. 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

AIMIE NGHIEM

\_\_\_\_\_  
Typed or printed name of signee

**State of California**  
**Secretary of State**

CERTIFICATE OF STATUS

ENTITY NAME: COAST AUTONOMOUS LLC

FILE NUMBER: 201708610466  
FORMATION DATE: 03/27/2017  
TYPE: DOMESTIC LIMITED LIABILITY COMPANY  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State of  
California.

No information is available from this office regarding the financial  
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this  
certificate and affix the Great Seal  
of the State of California this day of  
June 21, 2019.

ALEX PADILLA  
Secretary of State