

1119000007138

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

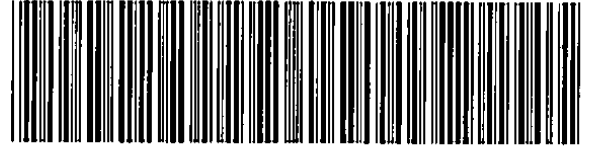
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

119-62649

NM

Office Use Only



900331134099

06/24/19 11:00 AM 155.0

FILED  
2019 JUL 24 PM 2:39  
CLERK OF STATE  
TALLAHASSEE FLORIDA

D. BRUCE  
JUL 24 2019



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 8, 2019

IRENE LEE  
10213 KAREN AVE NE  
ALBUQUERQUE, NM 87111

SUBJECT: SOMEDAY 5L4D, LLC  
Ref. Number: W19000062649

We have received your document for SOMEDAY 5L4D, LLC and your check(s) totaling \$155.00. However, the document has not been filed and is being retained in this office for the following:

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 of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6842.

Deborah Bruce  
Corporate Records Supervisor II

Letter Number: 919A00013735

2019 JUL 24 PM 2:33  
RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section  
Division of Corporations

SOMEDAY 5L4D, LLC  
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:

IRENE LEE

Name of Person

SOMEDAY 5L4D, LLC

Firm/Company

10213 Karen Ave NE

Address

Albuquerque, NM 87111

City/State and Zip Code

ijlee@spinn.net

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

For further information concerning this matter, please call:

Amy Demi

904

300-6172

Name of Contact 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 following amount:

☐ \$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

RECEIVED  
JUL 24 2019

2019 JUL 24 PM 2:35

FILED

**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. SOMEDAY 5L4D, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
2. New Mexico 53-19-1 to 53-19-74 NMSA 1978  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 4077699  
(FEI number, if applicable)

- (Date first transacted business in Florida, if prior to registration:  
(See sections 605.0904 & 605.0905, F.S. to determine penalty (if any):
5. 14 Marlin  
(Street address of Principal Office)  
Ponte Vedra Beach, FL 32082
6. 239 Canal Blvd  
(Mailing Address)  
Ponte Vedra Beach, FL 32082

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

Name: AMY DEMI

Office Address: 239 Canal Blvd  
Ponte Vedra Beach, Florida 32082  
(City) (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.*

*Amy Demi*  
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Landlord</u>	<u>Irene Lee</u> <u>10213 Karen Ave NE</u> <u>Albuquerque, NM 87111</u>	<u>Manager</u>	<u>Amy Demi</u> <u>239 Canal Blvd</u> <u>Ponte Vedra, FL 32082</u>
_____	_____	_____	_____
_____	_____	_____	_____

(Use attachments if necessary)

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.

*Irene Lee*  
Signature of an authorized person

IRENE LEE Irene Lee  
Typed or printed name of signer

# OFFICE OF THE SECRETARY OF STATE

## NEW MEXICO

### *Certificate of Good Standing and Compliance*

IT IS HEREBY CERTIFIED THAT:

**SOMEDAY 5L4D, LLC**  
**4077699**

the above named entity, a Company organized under the laws of New Mexico, is duly authorized to transact business in New Mexico as a Domestic Limited Liability Company, under the

**Limited Liability Company Act**

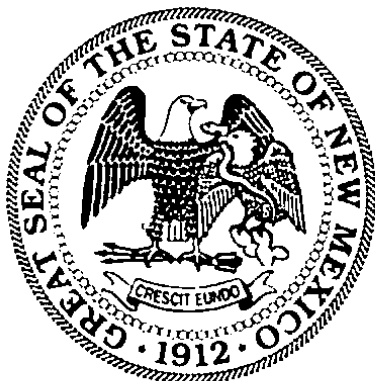
**53-19-1 to 53-19-74 NMSA 1978**

having filed its Articles of Organization on September 3, 2008, and Certificate of Organization issued as of said date.

It is further certified that the fees due to the Office of the Secretary of State which have been assessed against the above named entity have been paid to date and the entity is in good standing and duly authorized to transact business as its existence has not been revoked in New Mexico. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.

Certificate Issued: **May 16, 2019**

**In testimony whereof, the Office of the Secretary of State has caused this certificate to be signed on this day in the City of Santa Fe, and the seal of said office to be affixed hereto.**



*Maggie Toulouse Oliver*

**Maggie Toulouse Oliver**  
**Secretary of State**

**Certificate Validation #: 0029625**

A certificate issued electronically from the New Mexico Secretary of State's office is immediately valid and effective. The validity of a certificate may be established by viewing the **Certificate Validation** option on the Business Filing System at <https://portal.sos.state.nm.us/bfs/online> and following the instructions displayed under **Certificate Validation**.