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PICK-UP WAIT MAIL						
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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 13, 2019

LUCIA VALENTOVA 2065 WINTERSET DR LAKELAND, FL 33813

SUBJECT: LIL' BOO APPAREL Ref. Number: W19000074813

We have received your document for LIL' BOO APPAREL and your check(s) totaling \$155.00. 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.

The name of a limited liability company in the state of Florida must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." Please add the appropriate designation to the name of your limited liability company or to the alternate name you have selected for the state of Florida, if your name is unavailable in this state. The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The registered agent must sign accepting the designation. \checkmark \lor

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.

Brooke N Kinsey Regulatory Specialist II

Letter Number: 419A00016684

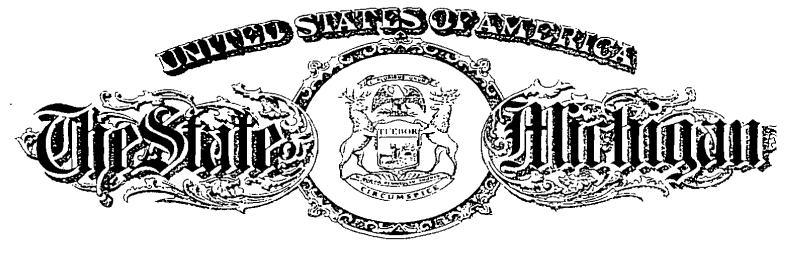
AUG 22 2019

COVER LETTER

	ration Section in of Corporation	s				
SUBJECT:	الما	L' BOO APP A	AREL LLC. f Limited Liability Company			
The enclosed "A Existence, and o	application by For- heck are submitted	eign Limited Liability Cor I to register the above refe	mpany for Authorization to Trerenced foreign limited liabili	ransact Business in Florida," Certificate of ty company to transact business in Florida.		
Please return al	correspondence c	oncerning this matter to th	ne following:			
			ALENTOVA Name of Person			
			Name of Person			
LIL' BOO APPAREL LLC.						
Firm/Company						
2065 WINTERSET DR.						
			Address			
City/State and Zip Code						
	<u> </u>	City	/State and Zip Code			
E-mail address: (to be used for future adnual report notification)						
For further infor	mation concerning	g this matter, please call:				
Lyc	Name o	TONA Contact Person	at (720) 21 Area Code Da	ytime Telephone Number		
Divisio Registr P.O. B	ing ADDRESS: n of Corporations ation Section ox 6327 assee, F1, 32314		Division Registra Clifton 2661 Ex	T ADDRESS: n of Corporations ation Section Building secutive Center Circle ssee, FL 32301		
	eck for the follow: 5.00 Filing Fee	ing amount: \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy		

A A PLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

		TION 605.0902, FLORIDA STATUTES, THE SINESS IN THE STATE OF FLORIDA:	FOLLOWING IS SUBMITTED TO REGIST.	ER A FOREIGN LIMITED LIABILIT
i			nited Liability Company." "L.L.C.," or "LLC.")	
	(Name of Foreign I	amiled Liability Company; must include Lim	med Liability Company. Lattice, or tale, 7	
(If na			Florida. The alternate name must include "Limited Lial	
2	MICH'	ich foreign limited liability company is organized)	3. <u>SI-265-</u> (Fill numb	9791
	(Jurisdiction under the law of wh	ich foreign limited liability company is organized)	(FE) numu	ет, п аррисане)
4.		(Date tiest transacted business in Florida if prior	to registration)	
		(Date first transacted business in Florida, if prior (See sections 605 0904 & 605 0905, F.S. to dete		201
5	2065 WINTE	RSET DP.	6. 2065 WINTER	SEL DRO
	LAKELAND ,		LAKELAND FL	338135 77
			'	<u> </u>
7.	Name and street address	s of Florida registered agent: (P.O. B		
	Name:	LUCIA VALENTOV	<u>A</u>	20
	Office Address:	2065 WINTERSE	ET_DR:	
	omee madrens.		, Florida 236	13
		(City)	(Zip cod	<u>c)</u>
ana	l accept the obligations	of my position as registered agent.		
		(Registered agen	ıt's signature)	
8.	The name, title or capa Title or Capacity:	city and address of the person(s) who Name and Address:	has/have authority to manage is/are: <u>Title or Capacity:</u>	Name and Address:
	OMNEK	Lucia Valentovi		
		CAKELAND FI 33	D2. E(2	
		<u> </u>		
				
(U:	se attachments if necess	sarv)		
•			d, duly authenticated by the official ha	aving custody of records in the
juri	sdiction under the law on the translator must be su	of which it is organized. (If the certific	cate is in a foreign language, a translat	ion of the certificate under oath
10. sub	This document is execumited in a document to	the Department of State constitutes a	203 (1) (b). Florida Statutes. I am awar third degree felony as provided for in	re that any false information s.817.155, F.S.
		Signat	ture of an authorized person	
		LUCIA VALENTOVA	d or printed name of signee	



Department of Licensing and Regulatory Affairs Lansing, Michigan

This is to Certify That LIL' BOO APPAREL, LLC

was validly authorized on May 16, 2016, 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.

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 19th day of July, 2019.

Julia Dale, Director

Corporations, Securities & Commercial Licensing Bureau