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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

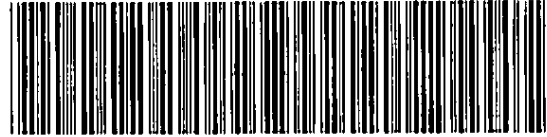
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Jessica gave
permission to
correct name

Office Use Only



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2019 AUG 27 PM 3:58

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AUG 28 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 19, 2019

JESSICA LEFEBRE
2121 SW 20TH AVENUE
CAPE CORAL, FL 33991

SUBJECT: ENCANTO DEL MARC, LLC
Ref. Number: W19000075384

We have received your document for ENCANTO DEL MARC, 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):

You failed to make the correction(s) requested in our previous letter.

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.

Brooke N Kinsey
Regulatory Specialist II

Letter Number: 719A00017115



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 14, 2019

JESSICA LEFEBRE
2121 SW 20TH AVENUE
CAPE CORAL, FL 33991

SUBJECT: ENCANTO DEL MARC, LLC
Ref. Number: W19000075384

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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: 819A00016804

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Encanto Del Mar 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:

Jessica D Lefebre
Name of Person
Encanto Del Mar LLC
Firm/Company
2121 SW 20th Ave
Address
Cape Coral, FL 33991
City/State and Zip Code
Jessica@JessicaLefebre.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jessica Lefebre 239 770-3325
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. Encanto Del Mar 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. San Juan, Puerto Rico
(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. 165 Ponce de Leon Ave Ste 201
(Street Address of Principal Office)

6. 2121 SW 20th Ave
(Mailing Address)

San Juan, PR, 00917

Cape Coral, FL 33991

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

Name: Jessica D Lefebre

Office Address: 2121 SW 20th Ave

Cape Coral 33991
(City) , Florida (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.

Jessica Lefebre
(Registered agent's signature)

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2019 AUG 27 PM 3:58
HALL COUNTY CLERK
TALLAHASSEE, FL

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>
<input type="checkbox"/> Manager	Name: <u>Jessica D Lefebre</u>
<input checked="" type="checkbox"/> Member	Address: <u>2121 SW 20th Ave</u>
<input type="checkbox"/> Authorized	<u>Cape Coral FL 33991</u>
Person	<u></u>
<input type="checkbox"/> Other	<input type="checkbox"/> Other

<input type="checkbox"/> Manager	Name: <u></u>
<input type="checkbox"/> Member	Address: <u></u>
<input type="checkbox"/> Authorized	<u></u>
Person	<u></u>
<input type="checkbox"/> Other	<input type="checkbox"/> Other

<input type="checkbox"/> Manager	Name: <u></u>
<input type="checkbox"/> Member	Address: <u></u>
<input type="checkbox"/> Authorized	<u></u>
Person	<u></u>
<input type="checkbox"/> Other	<input type="checkbox"/> Other

<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>Joseph A Lefebre</u>
<input checked="" type="checkbox"/> Member	Address: <u>2121 SW 20th Ave</u>
<input type="checkbox"/> Authorized	<u>Cape Coral, FL 33991</u>
Person	<u></u>
<input type="checkbox"/> Other	<input type="checkbox"/> Other

<input type="checkbox"/> Manager	Name: <u></u>
<input type="checkbox"/> Member	Address: <u></u>
<input type="checkbox"/> Authorized	<u></u>
Person	<u></u>
<input type="checkbox"/> Other	<input type="checkbox"/> Other

<input type="checkbox"/> Manager	Name: <u></u>
<input type="checkbox"/> Member	Address: <u></u>
<input type="checkbox"/> Authorized	<u></u>
Person	<u></u>
<input type="checkbox"/> Other	<input type="checkbox"/> Other

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2019 AUG 27 PM 3:58
HALL COUNTY CLERK
JESSICA D. LEBRE

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.

Jessica Lefebre
Signature of an authorized person
Jessica Lefebre
Typed or printed name of signee



Government of Puerto Rico

CERTIFICATE OF EXISTENCE

I, **MARÍA A. MARCANO DE LEÓN**, Under Secretary of State of the Government of Puerto Rico,

CERTIFY: That according to our records **ENCANTO DEL MAR LLC**, with registration number **431186**, is a domestic for profit limited liability company organized on **July 26, 2019**.

This certification does not certify that this corporation has filed its annual reports, pursuant to the requirements of the General Corporations Law, as amended. If you need to know if such reports have been filed, you must request a Certificate of Good Standing.

REC-100
19 AUG 27 AM 11:52
SECRETARY OF STATE
FALL 2019



IN WITNESS WHEREOF, the undersigned by virtue of the authority vested by law, hereby issues this certificate and affixes the Great Seal of the Government of Puerto Rico, in the City of San Juan, Puerto Rico, today, **August 22, 2019**.

A handwritten signature in black ink, reading "María A. Marciano de León".

MARÍA A. MARCANO DE LEÓN
Under Secretary of State

To validate this certificate go to: <http://estado.pr.gov/>

This certificate can be validated an unlimited number of times before its expiration date of 21-Aug-2020.

Certificate Validation Number: **310593-77205688**