

W119000008810

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2019 SEP -9 PM 3:22  
TALLAHASSEE, FLORIDA

✓



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 30, 2019

NINOTCHKA HECHT  
10544 NW 26TH ST.  
STE:E-204  
DORAL, FL 33172

SUBJECT: SMART CLUB MULTI-SPACE LLC  
Ref. Number: W19000068908

We have received your document for SMART CLUB MULTI-SPACE 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):

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.

Yvette Scott  
Document Specialist II

Letter Number: 119A00015487

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SMART CLUB MULTI-SPACE 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:

Ninotchka Hecht

Name of Person

FAST FILING SERVICES LLC

Firm/Company

10544 NW 26TH ST STE E-204

Address

DORAL FL 33172

City/State and Zip Code

fastfilingservices@gmail.com

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

For further information concerning this matter, please call:

Ninotchka Hecht

786

762-2048

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

RECEIVED

SEP - 9 2019

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. SMART CLUB MULTI-SPACE LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

N/A

(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. NEW YORK STATE

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

3. 61-1898903

(FEI number, if applicable)

4. 06/01/2019

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 901 LINCOLN STREET

(Street Address of Principal Office)

6. 901 LINCOLN ST

(Mailing Address)

HOLLYWOOD

HOLLYWOOD

FL 33019

FL 33019

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

Name: JOSE LUIS SUCH

Office Address: 901 LINCOLN STREET

HOLLYWOOD

(City)

33019

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.

(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: JOSE LUIS SUCHI  
☒ Member Address: 901 LINCOLN ST  
☐ Authorized HOLLYWOOD FL 33019  
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:**

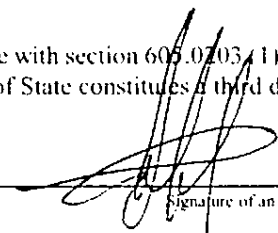
☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person \_\_\_\_\_  
☐ 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

JOSE LUIS SUCHI  
\_\_\_\_\_  
Typed or printed name of signer

**State of New York**  
**Department of State** } ss:

I hereby certify, that SMART CLUB MULTI-SPACE LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/09/2018, and that the Limited Liability Company is existing so far as shown by the records of the Department.



2019 SEP -9 PM 3:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

\*\*\*

*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 23rd day of August two  
thousand and nineteen.*

*Brendan C. Hughes*

Brendan C Hughes  
Executive Deputy Secretary of State