

MASSACHUSETTS

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

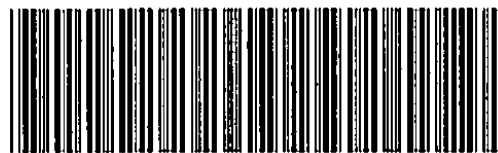
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



40033341153

09/11/19--01024--014

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Ace Travel Group Holdings 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

Please return all correspondence concerning this matter to the following:

Kevin Kimick

Name of Person

Ace Travel Group Holdings LLC

Firm/Company

3140 West Kennedy Boulevard, Suite 120

Address

Tampa, Florida 33609

City/State and Zip Code

kevin@bayouswamptours.com

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

For further information concerning this matter, please call:

Kevin Kimick

646

854-7646

at ()

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

2019 SEP 11 PM 4:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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. Ace Travel Group Holdings 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. Wyoming

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

3. 84-2157511

(FEI number, if applicable)

4. 20/Jun'19

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

5. 3140 West Kennedy Boulevard

(Street Address of Principal Office)

Suite 120

Tampa, Florida 33609

6. 3140 West Kenney Boulevard

(Mailing Address)

Suite 120

Tampa, Florida 33609

2019 SEP 11 PM 4:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Name: Joseph A Franzese III

Office Address: 3140 West Kennedy Boulevard, Suite 120

Tampa

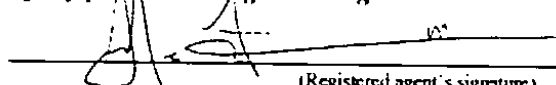
(City)

, Florida 33609

(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 designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further accept the obligations of my position as registered agent.



(Registered agent's signature)

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

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

prtnr

Kevin Kimick

prtnr

Joseph Franzese

3888 Merrick Rd

1915 W Carmen

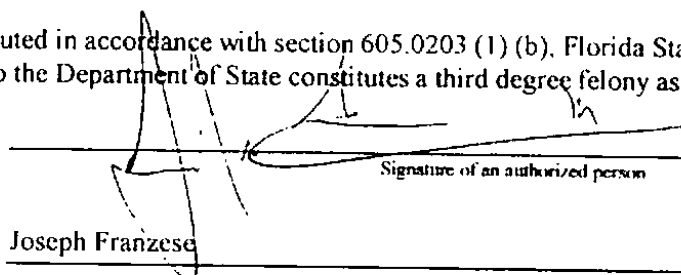
Seaford, 11783

Tampa 33606

(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 jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate and 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

Joseph Franzese

Typed or printed name of signee

STATE OF WYOMING
Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING hereby certify that according to the records of this office,

Ace Travel Group Holdings LLC

is a

Limited Liability Company


formed or qualified under the laws of Wyoming did on **June 27, 2019**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned identification number **2019-000863258**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 6th day of August, 2019 at 9:28 AM. This certificate is assigned 032123018.

SECRETARY OF STATE
LAHANA
SEP 11 PM 4:38
FLORIDA




Secretary of State