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## Foreign Limited Liability Company CHAPARRAL INVESTMENTS I, LLC

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## COVER LETTER

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Enclosed	is a check for the fo	ollowing amount: o: FLORIDA DEPART	MDhm ev ev -	·	
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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE 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:

aparral Investment							
(Name of Foreig	on Limited Liability Company; must include "Limit	ad Liability Compa	пу." "L L С" о	<u>ر بر ۱۳۸۸ اسم</u>	<u> </u>	<u> </u>	
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	(Date first transacted business in Florida, if prior to (See sections 605,9904 & 605,0905, F.S. to determi	regulation.)				-	
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East LasOlas Blv	d #130	same					
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ne and street addres	ss of Florida registered agent: (P.O. Hox  Peter A Rose	NOT acceptab	le)				
Name:		NOT acceptab	le)				
	Peter A Rose	·	3343	32			
Name:	Peter A Rose 1877 S Federal Hwy #100 Bocs Raton	·	3343 Florida	-			
Name: Office Address:	Peter A Rose  1877 S Federal Hwy #190  Boca Raton  (City)	·	3343 Florida	32 (Zip code)			
Name: Office Address:	Peter A Rose  1877 S Federal Hwy #190  Boca Raton  (City)		3343 Florida	(Zip code)			
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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: Title or Capacity: Name and Address: Name: Agustin Dominguez Larrea Manager ☐ Manager Name: \_\_\_ Address: 401 E Las Olas Blv #130 ☐ Member Member Address: \_\_\_\_ Ft. Lauderdale Fl 33301 ☐ Authorized ☐ Authorized Person Person Other Other\_\_\_\_ Other\_ Other\_ Manager Manager Manager Member Address: Member ☐ Authorized Authorized Person Person. Other ☐Other\_\_\_\_\_ Other\_ ■ Manager Manager | Name: Member Address: ☐ Member Authorized ☐ Authorized Person Person Other Other\_\_\_\_ Other\_\_\_\_ Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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. Agustin Dominguez Larrea

Typed or printed name of signee

A.D. 2019.

## <u>Delaware</u>

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CHAPARRAL INVESTMENTS I LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE NINETEENTH DAY OF SEPTEMBER, A.D. 2019

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHAPARRAL NO INVESTMENTS I LLC" WAS FORMED ON THE EIGHTEENTH DAY OF SEPTEMBER, P. 1

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN-

7613699 8300
SR# 20197130828
You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203632041

Date: 09-19-19