

N1900009351

(Requestor's Name)

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(Address)

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Y SCOTT

SEP 30 2019





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 14, 2019

JOSEPH ANDREW AUSMUS  
6020 GREENWOOD PLAZA BLVD  
SUITE 100  
GREENWOOD VILLAGE, CO 80111

SUBJECT: CB8 FLORIDA, LLC  
Ref. Number: W19000075467

We have received your document for CB8 FLORIDA, LLC and your check(s) totaling \$160.00. 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: 419A00016813

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** CB8 FLORIDA, 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:

JOSEPH ANDREW AUSMUS

\_\_\_\_\_  
Name of Person

AUSMUS LAW FIRM, P.C.

\_\_\_\_\_  
Firm/Company

6020 GREENWOOD PLAZA BLVD. SUITE 100

\_\_\_\_\_  
Address

GREENWOOD VILLAGE, COLORADO, 80111

\_\_\_\_\_  
City/State and Zip Code

ANDY@AUSMUSLAW.COM

\_\_\_\_\_  
E-mail address; (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

JOSEPH ANDREW AUSMUS

303

694-4248

\_\_\_\_\_  
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. CB8 FLORIDA, L.L.C.  
(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. COLORADO  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 84-2595430  
(FEI number, if applicable)

4. JULY 31, 2019  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 6120 GREENWOOD PLAZA BLVD.  
(Street Address of Principal Office)

6. 6120 GREENWOOD PLAZA BLVD.  
(Mailing Address)

SUITE 100

SUITE 100

GREENWOOD VILLAGE, 80111

GREENWOOD VILLAGE, CO 80111

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

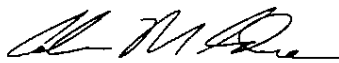
Name: ANDREW TIDWELL

Office Address: 4400 HIGHWAY 20 EAST, SUITE 403

NICEVILLE, Florida 32578  
(City) (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]:

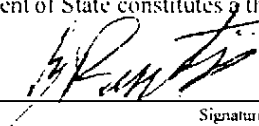
<u>Title or Capacity:</u>		<u>Name and Address:</u>		<u>Title or Capacity:</u>		<u>Name and Address:</u>	
<input checked="" type="checkbox"/> Manager	Name:	STEVEN M. BURTIS		<input type="checkbox"/> Manager	Name:		
<input checked="" type="checkbox"/> Member	Address:	6120 GREENWOOD PLAZA		<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized		BLVD., SUITE 100		<input type="checkbox"/> Authorized			
Person		GREENWOOD VILLAGE, CO 80111		Person			
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input type="checkbox"/> Manager	Name:			<input type="checkbox"/> Manager	Name:		
<input type="checkbox"/> Member	Address:			<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized				<input type="checkbox"/> Authorized			
Person				Person			
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input type="checkbox"/> Manager	Name:			<input type="checkbox"/> Manager	Name:		
<input type="checkbox"/> Member	Address:			<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized				<input type="checkbox"/> Authorized			
Person				Person			
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input type="checkbox"/> Manager	Name:			<input type="checkbox"/> Manager	Name:		
<input type="checkbox"/> Member	Address:			<input type="checkbox"/> Member	Address:		
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Person				Person			
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	

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**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

STEVEN M. BURTIS, MANAGER

Typed or printed name of signer

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Ausmus Law Firm, PC  
6020 Greenwood Plaza Blvd.  
Suite 100  
Greenwood Village CO 80111

CBS Florida, LLC

3384  
82-739/1070

Date 7-31-19

Pay to the order of Florida Dept. of State \$ 160  
One hundred and sixty dollars

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included  
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720-880-5000  
www.redstonebank.com

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OFFICE OF THE SECRETARY OF STATE  
OF THE STATE OF COLORADO

**CERTIFICATE OF FACT OF GOOD STANDING**

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

CB8 FLORIDA, LLC.

is a

Limited Liability Company

formed or registered on 07/26/2019 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20191606221.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 07/24/2019 that have been posted, and by documents delivered to this office electronically through 07/26/2019 @ 15:58:46.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 07/26/2019 @ 15:58:46 in accordance with applicable law. This certificate is assigned Confirmation Number 11707903.



*Jena Griswold*

Secretary of State of the State of Colorado