

M19000009383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

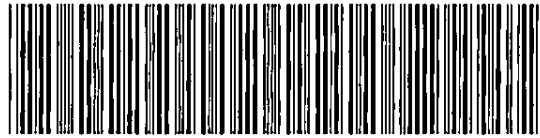
(Business Entity Name)

(Document Number)

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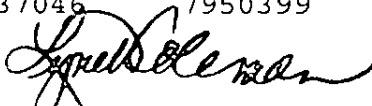
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CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 937046 7950399  
AUTHORIZATION :   
COST LIMIT : \$ 125.00

ORDER DATE : September 27, 2019  
ORDER TIME : 12:09 PM  
ORDER NO. : 937046-005  
CUSTOMER NO: 7950399

FOREIGN FILINGS

NAME: EL CAR WASH OKEE LLC,  
A DELAWARE LIMITED LIABILITY  
COMPANY

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

         CERTIFIED COPY  
XX          PLAIN STAMPED COPY  
         CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER: \_\_\_\_\_



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. EL CAR WASH OKEE LLC, a Delaware limited liability company
(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. Delaware (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. 5201 SW 8TH STREET (Street Address of Principal Office)
MIAMI, FL 33134
6. 5201 SW 8TH STREET (Mailing Address)
MIAMI, FL 33134

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

Name: Justin Landau
Office Address: 5201 SW 8TH STREET
MIAMI, Florida 33134
(City) (Zip code)

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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:**  Manager  Member  Authorized Person

**Name and Address:** Name: Justin Landau  
Address: 2831 S. BAYSHORE DRIVE, / COCONUT GROVE, FL 33133  
Title: CEO

Other \_\_\_\_\_  Other \_\_\_\_\_

**Title or Capacity:**  Manager  Member  Authorized Person

**Name and Address:** Name: \_\_\_\_\_  
Address: \_\_\_\_\_

Other \_\_\_\_\_  Other \_\_\_\_\_

Manager  Member  Authorized Person

**Name and Address:** Name: GEOFFREY KARAS  
Address: 2900 NE 7TH AVE, APT 3207 MIAMI, FL 33137  
Title: President

Other \_\_\_\_\_  Other \_\_\_\_\_

Manager  Member  Authorized Person

**Name and Address:** Name: \_\_\_\_\_  
Address: \_\_\_\_\_

Other \_\_\_\_\_  Other \_\_\_\_\_

Manager  Member  Authorized Person

**Name and Address:** Name: \_\_\_\_\_  
Address: \_\_\_\_\_

Other \_\_\_\_\_  Other \_\_\_\_\_

Manager  Member  Authorized Person

**Name and Address:** Name: \_\_\_\_\_  
Address: \_\_\_\_\_

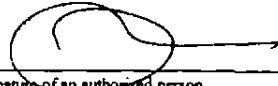
Other \_\_\_\_\_  Other \_\_\_\_\_

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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

Justin Landau

Typed or printed name of signee

# Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EL CAR WASH OKEE 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 FIRST DAY OF OCTOBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EL CAR WASH OKEE LLC" WAS FORMED ON THE TWENTIETH DAY OF SEPTEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



7617767 8300

SR# 20197312526

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203699938

Date: 10-01-19