# 11/19000009706

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



200334318402

03/33/19--01037--025 ++160.00

D. BRUCE DCT 14 MM

#### **COVER LETTER**

TO:	Registration Section Division of Corporations			
SUBJI	LakeSheen Investments, LLC			
0000	Name of Limited Liability Company			
Please	eturn all correspondence concerning this matter to the following:			
	Martin H. Velasquez			
	LakeSheen Investments, LLC  Name of Limited Liability Company  Closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida." Certificate of see, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida. Tectura all correspondence concerning this matter to the following:  Martin H. Velasquez.  Name of Person  LakeSheen Investments LLC  Firm/Company  1306 Cobb Industrial Dr.  Address  Marietta. Georgia 30066  City/State and Zip Code  hjaramillo@lacosecha.net  E-mail address: (to be used for future annual report notification)  ther information concerning this matter, please call:  Harold M Jaramillo  Name of Contact Person  Area Code  Daytime Telephone Number:  MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327  Tallahassee, FL 32314  Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE			
	LakeSheen Investments LLC			
	Firm/Company			
	1306 Cobb Industrial Dr.			
	Address	<del></del>		
	Marietta, Georgia 30066			
	City/State and Zip Code	cation)  The Telephone Number  DDRESS: Corporations Section ding tive Center Circle FL 32301		
	hjaramillo@lacosecha.net		2017	
	E-mail address: (to be used for future annual report notification)	•	,	( ,,-,
For fur	her information concerning this matter, please call:			ï
		 	ر چ	٠.
		nber;		•
	Division of Corporations  Registration Section  P.O. Box 6327  Tallahassee, FL 32314  Division of Corporations  Registration Section  Clifton Building  2661 Executive Center Circle	٠.٠ د		
	Please make check payable to: FLORIDA DEPARTMENT OF STATE  \$\sum_{\text{\$\subset}}\$\$\$125.00 Filing Fee \$\sum_{\text{\$\subset}}\$\$\$\$\$\$\$\$\$\$130.00 Filing Fee \$\sum_{\text{\$\subset}}\$			

# 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 TUMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

GEORGIA			ternate name must include "Limited Liability	Company, 1.1.	.c. or 1	H.C.
CHOROIN		3.	83-4561509			
(Jurisdiction under the law of wh	ich foreign limited liability company is organized)	٥.	5. (FEI number, if applicable)			_
09/01/2019						
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration ine penalty l	) abblity)	_		
1306 Cobb Industrial E		6.	1306 Cobb Industrial Dr.			
(Street Address of P	ancipal Office)	0.	(Mailing Address)			_
Marietta, Georgia 3006	6		Marietta, Georgia 30066			
<u> </u>		-				
		-				_
Name and street address	s of Florida registered agent: (P.O. Box	NOT a	cceptable)	•	2 <b>.73</b>	7
				• •	; ;	
Nivers	ADRIANA HENAO				ىُد.	!
Name:		<del> </del>			-37	,
					دِم	
Office Address:	325 Seven Isles Dr.			- :	1.7	
Office Address:	325 Seven Isles Dr.  Fort Lauderdale	···	33301			

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 Canacity: Name and Address: Title or Capacity: Name and Address: Name: Jairo Troncoso Name: Francisco F. Chavarria ■Manager Manager Address: \_\_\_ 4505 Bastion Dr. Member Member Address: Roswell, Georgia 30075-5285 Roswell, Georgia 30075-6860 ☐ Authorized Authorized Person Person Other\_\_\_\_ Other Other\_\_\_ Other \_\_\_\_ Name: \_\_\_ Adriana Henao Name: Martin H. Velasquez Manager Manager 325 Seven Isles Dr. Address: \_\_\_ 4309 Oglethorpe Loop NW ☐ Member Member Fort Lauderdale, FL 33301 Acworth, Georgia 30101-9534 Authorized Authorized Person Person Other\_\_\_\_Registered Agent Other\_\_\_\_ Other\_ Other\_ Manager Manager ■ Manager Address: Member ☐ Member Authorized F-3 ■ 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.

Typed or printed name of signee

ADRIANA HENAO

Control Number: 19055837

### STATE OF GEORGIA

## **Secretary of State**

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

#### CERTIFICATE OF ORGANIZATION

I, Brad Raffensperger, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

LakeSheen Investments LLC
a Domestic Limited Liability Company

has been duly organized under the laws of the State of Georgia on 04/24/2019 by the filing of articles of organization in the Office of the Secretary of State and by the paying of fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on 04/26/2019.



Brad Rafforgerger

Brad Raffensperger Secretary of State