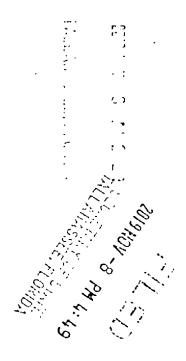
MACCEDIOSIG





100336828491





CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 038848

COST LIMIT : \$ 125-00

AUTHORIZATION

ORDER DATE: November 7, 2019

ORDER TIME : 12:0 PM

ORDER NO. : 038848-005

CUSTOMER NO: 7950399

FOREIGN FILINGS

NAME: LLJ DEVELOPMENT LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX / PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER:

COVER LETTER

TO:		ration Section n of Corporations	i						
SUBJEC		J Development LL	c						
		Name of Limited Liability Company							
The encl Existenc	losed "A e, and cl	pplication by Fore heck are submitted	ign Limited Liability Compar to register the above reference	ny for Authoriz ced foreign lim	ation to Transact Business in Florida ited liability company to transact bus	a," Certifi siness in I	cate of Florida.		
Please re	eturn all	correspondence co	oncerning this matter to the fo	llowing:)N 61(• 1		
		Vivian Pou			<u> </u>	1	 ; k		
		Name of Person							
		Jorge M Vigil, P.	.A			64:4 Hd			
	Firm/Company								
	265 Sevilla Avenue								
				Address					
	Coral Gables, FL 33134								
	City/State and Zip Code								
		vivian@jvigillaw.c	com						
			E-mail address: (to be used for	or future annua	l report notification)	_			
For furth	er infon	mation concerning	this matter, please call:						
	Vivian	Pou		786 at (497-4450				
		Name of	Contact Person	Area Code	Daytime Telephone Number	_			
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassec, FL 32314			STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					
			e following amount: e to: FLORIDA DEPARTM	ENT OF STA	TE				
	S \$12	5.00 Filing Fee	S130.00 Filing Fee & Certificate of Status		Filing Fee & \$160.00 Filing ied Copy of Status & Co	-			

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 LABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

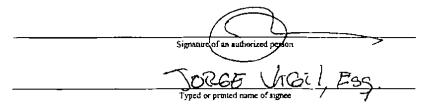
me unavailable, enter alternate	name adopted for the purpose of transacting busines	s in Florida. The alternate pame most	include "Limited Lish	ulity Company, " L.E.C	o: "L(C.)
elaware	. , , ,			3.55	
(Jurisdiction under the law of v	vhich foreign limited liability company is organized)	3	(FEI numbe	,	64: H Ha
· · · · · · · · · · · · · · · · · · ·	(Date first transacted business in Florica, if p (See sections 605 0904 & 605.0905, F.S. to	nior to registration.) determine penalty liability)			.
7101 SW 24 Street		7101 SW 24	Street		
(Street Address of	Principal Office)	ō	6. (Mailing Address)		
Ліаті, FL 33155		Miami, FL 33155			
same and street addre	ss of Florida registered agent: (P.O.	Box NOT acceptable)			
Name and street addre	ss of Florida registered agent: (P.O. Jorge M Vigil, P.A.	Box <u>NOT</u> acceptable)			
	· · ·	Box <u>NOT</u> acceptable)			
Name:	Jorge M Vigil, P.A. 265 Sevilla Avenue Coral Gables		33134 da		
Name:	Jorge M Vigil, P.A. 265 Sevilla Avenue	Box <u>NOT</u> acceptable)			

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:
Manager	Name: Lorenzo Luaces Jr.	Manager	Name:
☐Member	Address: 7101 SW 24 Street	☐ Member	Address: LC 99
Authorized	Miami, FL 33155	Authorized	NOV I
Person		Person	(O) (O)
Other		Other	
☐Manager	Name:	☐ Manager	Name:
Member	Address:	Member	Address:
Authorized		☐ Authorized	
Person		Person	
Other	Other	Other	Other
Manager	Name:	Manager	Name:
Member	Address:	Member	Address:
Authorized		☐ Authorized	
Person		Person	
Other	Other	Other	Other
Important Notice; U	se an attachment to report more than six (6). The a	ttachment will be ima	iged 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.



Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "LLJ DEVELOPMENT 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 SEVENTH DAY OF NOVEMBER, A.D. 2019.

PAID TO DATE.

Authentication: 203959579

Date: 11-07-19

6953347 8300 SR# 20197975016