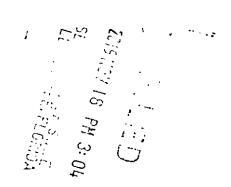
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November 2, 2019

BISMAY MARTINEZ 355 NW 72 AVE. APT:212 MIAMI, FL 33126

SUBJECT: EDP, LLC

Ref. Number: W19000096766

We have received your document for EDP, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The alternate name that you have chosen is not available. Please select a new name.

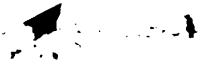
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 219A00022654

Yvette Scott Document Specialist II

www.sunbiz.org



COVER LETTER

BJECT:	DP. LLC				
		Name o	f Limited Liability Company		
e enclosed ". stence, and	Application by F check are submit	oreign Limited Liability Con tted to register the above refe	npany for Authorization to T renced foreign limited liabili	ransact Business in Florida," ity company to transact busing	Certifi ess in l
ase return al	l correspondence	e concerning this matter to th	e following:		
	Bismay Marti	nez			
		1	Name of Person		
	EDP, LLC			2019 NOV 18	
		I	firm/Company	A0	<u>,</u>
	322	NW 72 AUR	Apt 212	18 PH	TITU
		-	Address	- T- T-	
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	rmation concerni y Martinez		786 397-15 at ()	SI OF OLD	
Bisma:	rmation concerni y Martinez	ng this matter, please call: of Contact Person	786 397-15at ()	orification) 222 ytime Telephone Number T ADDRESS: of Corporations	
MAIL Divisio Registr P.O. Ba	y Martinez Name ING ADDRESS on of Corporation	ng this matter, please call: of Contact Person	at () 397-15 Area Code Day STREE* Division Registrat Ctifton E 2661 Exception	prification) 222 ytime Telephone Number T ADDRESS: of Corporations tion Section	
MAIL Divisio Registr P.O. Bo Tallaha	y Martinez Name ING ADDRESS on of Corporation ation Section ox 6327	of Contact Person	at () 397-15 Area Code Day STREE* Division Registrat Ctifton E 2661 Exception	prification) 222 ytime Telephone Number T ADDRESS: of Corporations tion Section Building ecutive Center Circle	

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. EDP. LLC				
(Name of Foreign	Limited Liability Company; must include "Limited	Liability Company," "L.L.C.," or "LLC.")		
	EDP parts	LLL	Say	
	name adopted for the purpose of transacting business in Florid	da. The alternate name must include "Limited Lab	ility Company," "L.L.C," or "LLC,")	
2. Delaware		3. 82-4940722		
(Jurisdiction under the law of w	hich foreign limited hability company is organized)	(FEI number, if applicable)		
4.				
	(Date first transacted business in Florida, if prior to re (See sections 605,0904 & 605,0905, F.S. to determine	gistration.) e penalty liability)		
. BECNUT		, ,	roal YAhoo.com	
(Street Address of	LAVE 457 2/2 Principal Office)	6. hismaylazai	(35)	
miami f	7 33/26	^_		
		Ac	20	
7 Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)	A0H6H0Z	
The state of the s		No r acceptance)		
Name:	Bismay Martinez	ASI		
Office Address:	355 NW 72nd Ave Apt 212	<u>%</u> ≏	<u></u>	
Office Address.			PR M	
	Miami `	ى التى 33126	_	
Registered agent's accep	(City)	(Zia toda	; ;	
	egistered agent and to accept service of pr	rocess for the above stated limited	iliability company at the place	
	ttion, I hereby accept the appointment as			
to comply with the provisi	ions of all statutes relative to the proper a	and complete performance of my a	luties, and I am familiar with	
	s of my position as registered agent.	, , , ,		
	•			
	(Registered agent's sig	mature)		
0 Th		at the second second		
Title or Capacity:	acity and address of the person(s) who has Name and Address:	Title or Capacity:	Nama and Address:	
	Name and Address.	Title of Capacity.	Name and Address:	
MGR	Bismay Martinez			
	355 NW 72nd Ave			
	Miami, FL-33426			
				
_				
(Use attachments if neces	sarv)			
•				
9. Attached is a certificate	of existence, no more than 90 days old, di	uly authenticated by the official hav	ving custody of records in the	
of the translator must be si	of which it is organized. (If the certificate	is in a foreign language, a translation	on of the certificate under oath	
of the translator must be si	uomittea)			
10. This document is exec	uted 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	d degree felony as provided for ir s	.817.155, F.S.	
		$M \mathcal{N}$		
	Signature of	f all authorized person		
		1		
	Bismay Martinez	1		
		rinted name of signee		

Page 1

Delaware

The First State

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

DELAWARE, DO HEREBY CERTIFY "EDP 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

TWENTY-THIRD DAY OF AUGUST, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EDP LLC" WAS FORMED ON THE SIXTH DAY OF JULY, A.D. 2017.

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

PH 3: 04

6468561 8300

SR# 20196682694

AND THE PROPERTY OF THE PROPER

Authent:cation: 203464247

Date: 08-23-19

You may verify this certificate online at corp.delaware.gov/authver.shtml