490001379

(R	Requestor's Name)		
(A	ddress)		
<u>A)</u>	(ddress)		
(C	City/State/Zip/Phone #)		
PICK-UP	MAIT	MAIL	
(E	Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of	Status	
Special Instructions to	o Filing Officer:		

Office Use Only



100337500671

12/02/19--01001--008 **305.00

2015 ECT 27 AM 10: 10

T GLASS DEC 0 2 2019

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 11/27/2019			
		**WALK	(<i>I</i> N#
ENTITY NAME SUC	GGERO GROUP, LLC		
DOCUMENT NUMBE	ER		
	PLEASE FILE THE ATTACHED AND RETURN		
xxxx	Plain Copy		
	Certified Copy		
	Certificate of Status	20 F	
		37	
		2019 15.1: 27	
	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY	_	, ,
	·	. 10	′:
	Certified Copy of Arts & Amendments	. :-	
	Certificate of Good Standing	_	
	Cert Copy of Restated Arts & Amends if available. If not provide Cert. Copy of Arts & A	mends.	
	APOSTILLE' / NOTARIAL CERTIFICATION		
COUNTRY OF DESTI	NATION		
NUMBER OF CERTIF	CATES REQUESTED	_	
TOTAL OWED 125	СНЕСК # ⁶⁹⁴⁸	<u> </u>	<u>-</u>
Please call Tina a	t the above number for any issues or concerns. Thank you so	much!	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLANCE 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:

			
nne unavailable, enter alternate	name adopted for the purpose of transacting business in Flo	orida. The alternate name must include "Limited Liability Company."	"L.L.C," or "LLC.
DELAWARE		•	
(Jurisdiction under the law of v	which foreign limited liability company is organized)	3(FEI number, it applicable)	
11/26/2019			
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration) ine penalty liability)	
265 S Federal Hwy #334		265 S Federal Hwy #334	
(Street Address of	Principal Office)	6. (Mailing Address)	
Deerfield Beach,	FL 33441	Deerfield Beach, FL 33441	
			
Name and etreet address	es of Florida registered events (D.O. Des	NOT connected a	2619
Name and street addre	ss of Florida registered agent: (P.O. Box	(NOT acceptable)	261e1
Name and <u>street addre</u> Name:	ss of Florida registered agent: (P.O. Box	(<u>NOT</u> acceptable)	26191: 1:27
		NOT acceptable)	27
Name:	Incorporating Services, Ltd.	NOT acceptable) 32301	26191: 127 Atti0: 10

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.

(Co 1116 20 . Assistant Secretary	
(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: Name and Address: Title or Capacity: Name and Address: Name: Artem Lytvynchenko Manager Name: ____ Manager Manager 265 S Federal Hwy #334 Member ☐ Member Address: _____ Deerfield Beach, FL 33441 Authorized Authorized Person Person Other Other_____ 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: ਨ ☐ Authorized 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. Signature of an authorized person Artem Lyrvynchenko

Typed or printed name of signee

Page 1



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

DELAWARE, DO HEREBY CERTIFY "SUGGERO GROUP, 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-SIXTH DAY OF NOVEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SUGGERO GROUP, LLC" WAS FORMED ON THE FIFTH DAY OF SEPTEMBER, A.D. 2019.

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

01317727 1410:10

Authentication: 204088224

Date: 11-26-19