1800000081

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to F	Filing Officer	
	_	
ω^{μ}	OHI	383

Office Use Only



100338443401

209 DEC 27 ANTH: 22



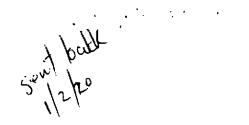
CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

12/27/2019

D	ate:	12/27/2019	
		Acc#I2016000007	
Name:	LUCEY	JNLIMITED LLC	2019 ECC 27
Document #:			33 60
Order #:	1249624	8	55. 1
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:			PH 1: 46
Apostille/Notarial Certification:		Country of Destination Number of Certs:	n:
Filing: 🗸	Certif Plain COGS		
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amo	unt:\$ 155.00	

Thank you!





December 30, 2019

CT CORP

CORRECTED
Please Allow For
Same File Date

SUBJECT: LUCEY UNLIMITED LLC

Ref. Number: W19000111283

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

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Yvette Scott Document Specialist II

49 CAST 27 SAST

Letter Number: 519A00026303

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

IN COMPLIANCE WITH SECTION 605 6902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate n	nine adopted for the purpose of transacting business in Fl	orida. The alternate name must include "Li	inited Liability Company, SP, L.C." or "LLC.
State of Oregon		93-3926466	DEC
(Jurisdiction under the law of w)	nich foreign finnted liability company is organized)	3	(FEI number, (Gentlicable)
1/1/2020			PH 4: 46
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	registration) une penalty liability)	
110 North Federal Hig	hway, Apt 8	110 North Faderal I	Cohumu Ant 2"
(Street Address of F	Principal Office)	(Mn	nling Address)
Fort Lauderdale, FL 33	3301	Fort Lauderdale, FL	33301
Name and street addres Name:	ss of Florida registered agent: (P.O. Bo: Marianna Seiler	x <u>NOT</u> acceptable)	
		x <u>NOT</u> acceptable)	
Name:	Marianna Seiler	333	01

·ee

\$. 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: Kimberly Lucey ■Manager ☐ Manager Name: ____ 110 North Federal Highway ■Member Member Apartment 8 Authorized Authorized Fort Lauderdale, FL 33301 Person Person Other___ Other Other_ Manager Name: Manager ☐Member Member Address: _ Authorized ☐ Authorized Person Person Other Other____ Other___ Other ■ Manager Manager | Member Address: ☐ Member Address: 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.

Typed or printed name of signee

Marianna Seiler, Esq.

State of Oregon

OFFICE OF THE SECRETARY OF STATE

Corporation Division

Certificate of Existence 129H630J5

I, BEV CLARNO, SECRETARY OF STATE and Custodian of the Seal of said State, do hereby certify:

LUCEY UNLIMITED LLC

is

Organized

under the laws of The State of Oregon

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

BEV CLARNO, SECRETARY OF STATE

12/24/2019