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(Requestor's Name) (Address)	200337516272			
(Address) (City/State/Zip/Phone #)	12/06/1901023006 <b>**</b> 130.00			
Business Entity Name)				
(Document Number) Certified Copies Certificates of Status	2020 JAH 15 AH			
Special Instructions to Filing Officer:				
W2000017B1				

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JAN 15 2020 M. SOLOMON

#### COVER LETTER

#### TO: Registration Section Division of Corporations

## SUBJECT: Island Breeze Realty LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Thomas Mulhall			
	Name o	of Person	
Island Breeze Rea	alty LLC		
	Firm/Co	ompany	
371 Stirrup Key H	Blvd		
	Add	dress	_
Marathon, FL 33	050		
	City/State a	nd Zip Code	
controlbreeze@bell			
,	E-mail address: (to be used for f	future appund raport polition(ion)	
		future annual report notification)	
		nutre annuar report notrication)	
er information concerning t	his matter, please call:		
er information concerning t Thomas Mulhall	his matter, please call:		
r information concerning t Fhomas Mulhall Name of C MAILING ADDRESS:	his matter, please call:	305 <u>304-6111</u> Area Code Daytime Telephone Number STREET ADDRESS:	
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er information concerning t Thomas Muthall	his matter, please call:	305 <u>304-6111</u> Area Code Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section	
er information concerning t Thomas Mulhall Name of C MAILING ADDRESS: Division of Corporations Registration Section	his matter, please call:	(305) Area Code STREET ADDRESS: Division of Corporations	
er information concerning t <u>Thomas Mulhall</u> <u>Name of Comportions</u> <u>Name of Corporations</u> Registration Section P.O. Box 6327	his matter, please call:	305 <u>304-6111</u> Area Code Daytime Telephone Number STREET ADDRESS: Division of Corporations Registration Section Clifton Building	
Er information concerning t Thomas Mulhall Name of O MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Fallahassee, FL 32314 Enclosed is a check for the	his matter, please call: at ( Contact Person	305       304-6111         Area Code       Daytime Telephone Number         STREET ADDRESS:       Division of Corporations         Registration Section       Clifton Building         2661 Executive Center Circle       Tallahassee, FL 32301	

#### 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:

ı.	Island	Breeze	Realty	LLC
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.

	ited Liability Company, Florida			
name unavailable, enter alternate na	me adopted for the purpose of transacting business in Hor	nda. The alternate is	ame must include "Limited Liability Company	y," "L I. C," at "LLC ")
Texas		83-2	332166	
Uurisdiction under the law of whi	ch foreign limited hability company is organized)	3	(FEI number, if applicab	de 1
	(Date first transacted business in Florida, it prior to i	egistration (		
	(See sections 605 0904 & 605 0905; F.S. to determine	ne penalty hability)		
11502 Island Breeze St.		Pearla 6.	and, TX 77584	
(Street Address of Pr	incipal Office)	0.	(Mailing Address)	<u> </u>
				6
Name and street address	of Florida registered agent: (P.O. Box	<u>NOT</u> accepta	abłe)	
				i di
	Thomas Mulhall			
Name:	Thomas Mulhall	<u></u>	_	A
Name:			-	
	371 Stirrup Key Blvd.		-	AM 8: L
Name: Office Address:			-	3.00
	371 Stirrup Key Blvd.		- - - 33050 - Florida	An 8: 47

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. Digitally signed by Tom





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: Tom Mulhall	Manager	Name: Kim Bassett
Member	Address: 371 Stirrup Key Blvd.	Member	Address: 371 Stirrup Key Blvd.
Authorized	Marathon, FL 33050	Authorized	Marathon, FL 33050
Person		Person	
Other	Other	Other	Other
Manager	Name: Carmen Acker	Manager	Name:
Member	Address: 11502 Island Breeze Street	Member	A demonst
Authorized	Pearland TX 77584	Authorized	Address:
Person		Person	
Other	Other	Other	Other
Manager	Name:	🗌 Manager	Name:
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. 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.

Signature of an authorized person

. . <sup>.</sup>

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Ruth R. Hughs Secretary of State

# Office of the Secretary of State

## **Certificate** of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Island Breeze Realty LLC (file number 803154162), a Domestic Limited Liability Company (LLC), was filed in this office on October 30, 2018.

It is further certified that the entity status in Texas is in existence.

Delayed Effective date: November 01, 2018

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on December 02, 2019.



Ruth R. Hughs Secretary of State



### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 8, 2020

THOMAS MULHALL 371 STIRRUP KEY BLVD. MARATHON, FL 33050

SUBJECT: ISLAND BREEZE REALTY LLC Ref. Number: W20000001731

We have received your document for ISLAND BREEZE REALTY LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable : "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$788.75.

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

Letter Number: 520A0000538

www.sunbiz.org

Division of Corporations RO ROY 6297 Tallahasson Florida 29214

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