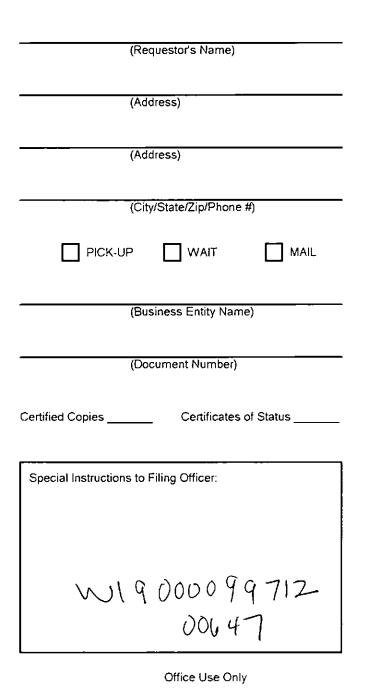
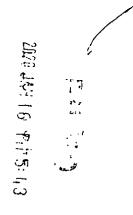
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50/10/20

COVER LETTER

TO:

JECT: _	clmo & Company, LLC				_
		Name of Li	mited Liability	Company	
				ation to Transact Business in Florida ited liability company to transact but	
return al	Il correspondence concerning	this matter to the fo	ollowing:		
	Alan Wilmot				
		Nan	ne of Person		
	Heitner Legal, PLLC				
	-	Fin	n/Company		_
	215 Hendricks Isle				
			Address		
	Fort Lauderdale, FL 3330	1			
		City/Sta	te and Zip Code	:	_
	alan@heitnerlegal.com				
	E-mail a	ddress: (to be used f	or future annua	d report notification)	_
urther info	rmation concerning this matt	er, please call;			ڊہ
Alan ^y	Wilmot		281 at (851-9570	c
	Name of Contact	Person	Area Code	Daytime Telephone Number	5
Division Regist P.O. B	ING ADDRESS: on of Corporations ration Section 80x 6327			STREET ADDRESS: Division of Corporations Registration Section Clifton Building	5 PH 5: 43
ı anan	assee, FL 32314			2661 Executive Center Circle Tallahassee, FL 32301	C
		ng amount:			

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

IN COMPLANCE WITH SECTION 605/0902, FLORIDA STATUTEN, THE FOLLOWING INSUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign	.C Limited Liability Company, must include "Limite	ed Liability Co	mpany," "L.L.C.," or "LLC.	")	· <u>-</u>	
name unavailable, enter alternate a	name adopted for the purpose of transacting husiness in Flo	orida. The alternal	te name must include "Limited I.	arbility Company,"	"L.L.C," or	"I.I.C ")
Elaware		2				
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	3	(FEI nu	mber, il'applicable)	
N/A						
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, F.S. to determ	registration)				
8 The Green, Ste A		8 T	he Gree, Ste A			
(Street Address of Principal Office)		О	(Mailing A	ddress)		
Dover, DE 19901		Do	ver, DE 19901			
Name and street address Name:	ss of Florida registered agent: (P.O. Box Heitner Legal	x <u>NOT</u> acce	ptable)		2020 JAN 16	
Office Address:	215 Hendricks Isle				P	
	Fort Lauderdale		33301 Florida	-	2: 1:3	لنتعد *
				(مارید	CO	
	(City)		(Zip c	ouci		
signated in this applica comply with the provisi		as registered	the above stated limite agent and agree to ac	ed liability co	acity. I fu	ırther

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: Kimberly Belmonte Name: Jason Belmonte Manager Manager Address: ___ 8 The Green, Ste A 8 The Green, Ste A ☐ Member Address: Member Dover, DE 19901 Dover, DE 19901 Authorized ☐ Authorized Person Person Other_ Other Other___ Other____ Name: Chris Dey Name: Doyal Bryant Manager Manager Address: 10832 Jordan Rae Lane 8 The Green, Ste A Member Address: ☐ Member Dover, DE 19901 Charlotte, NC 28277 Authorized Authorized Person Person Other Other____ Other____ Other Name: _____ Manager ☐ Manager Member Address: ____ ☐ Member ☐ 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

Typed or printed name of signee

Alan Wilmot



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

DELAWARE, DO HEREBY CERTIFY THAT "BELMO & COMPANY, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR

REVOKED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY

AUTHORIZED TO TRANSACT BUSINESS.

THE FOLLOWING DOCUMENTS HAVE BEEN FILED:

CERTIFICATE OF FORMATION, FILED THE TWENTY-FIFTH DAY OF SEPTEMBER, A.D. 2019, AT 12:43 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATE IS THE ONLY PAPER OF RECORD, THE LIMITED LIABILITY

COMPANY IN QUESTION NOT HAVING FILED AN AMENDMENT NOR HAVING

MADE ANY CHANGE WHATSOEVER IN THE ORIGINAL CERTIFICATE AS FILED.

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



Authentication: 204310817

Date: 12-27-19

7625394 8315 SR# 20198885247

STATE of DELAWARE LIMITED LIABILITY COMPANY CERTIFICATE of FORMATION

FIRST Name

The name of the limited liability company is: Belmo & Company, LLC

SECOND Registered Agent

The address of its registered office in the State of Delaware is 8 The Green, Suite A in the City of Dover. Zip code 19901.

The name of its registered agent at such address is A Registered Agent, Inc.

THIRD Duration

The duration of the limited liability company shall be perpetual.

FOURTH Purpose

The purpose for which the company is organized is to conduct any and all lawful business for which Limited Liability Companies can be organized pursuant to Delaware statute.

In Witness Whereof, the undersigned have executed this Certificate of Formation this 25th day of <u>September</u>, <u>2019</u>.

Pat Bine

Authorized Person

Name: Patrick Brickhouse

State of Delaware
Secretary of State
Division of Corporations
Delivered 12:43 PM 09/25/2019
FILED 12:43 PM 09/25/2019
SR 20197217724 - File Number 7625394



November 13, 2019

ALAN WILMOT 215 HENDRICKS ISLE FORT LAUDERDALE, FL 33301

SUBJECT: BELMO & COMPANY, LLC

Ref. Number: W19000099712

We have received your document for BELMO & COMPANY, 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):

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.

Sharon D Franklin Regulatory Specialist II

Letter Number: 619A00023365

RECEIVED
JAN 1 6 2020