

N 2000000027A

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

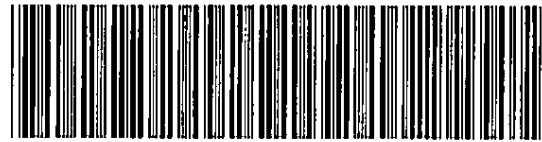
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W2000000007580
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Office Use Only



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01/13/20--01010--014 **130.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5 ✓



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 27, 2020

DENNIS DALTON
2589 COUNTRY LAKE DR.
CINCINNATI, OH 45233

SUBJECT: SURFSIDE INVESTMENTS LLC
Ref. Number: W20000007580

We have received your document for SURFSIDE INVESTMENTS 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):

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

Letter Number: 420A00001927

RECEIVED
MAR 09 2020

Date: February 6, 2020

To whom it may concern,

The enclosed certificate of good standing is the only documentation provided by the Ohio Secretary of State regarding the good standing status of the LLC, Surfside Investments.

This letter of good standing is being sent in reference to your request for further information on the status of the company's good standing in the State of Ohio.

If further documentation is required, please contact the Ohio Secretary of State and provide the validation number on the certificate of good standing.

Thank you for your assistance in this matter.

V/R,

Joseph Herrmann
Registered Agent

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CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Surfside Investments 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:

Dennis Dalton

Name of Person

N/A

Firm/Company

2589 Country Lake Dr

Address

Cincinnati, OH 45233

City/State and Zip Code

kimkdaltonphotography@gmail.com

E-mail address: (to be used for future annual report notification)

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DEPT. OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

Dennis Dalton

Name of Contact Person

at ()

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

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. Surfside Investments LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Blessed By The Sea, LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Ohio
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 30-1181188
(FEI number, if applicable)

4. 1/1/2020
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 2589 Country Lake Dr Cincinnati, OH 45233
(Street Address of Principal Office)

6. 2589 Country Lake Dr Cincinnati, OH 45233
(Mailing Address)

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TALLAHASSEE, FLORIDA

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

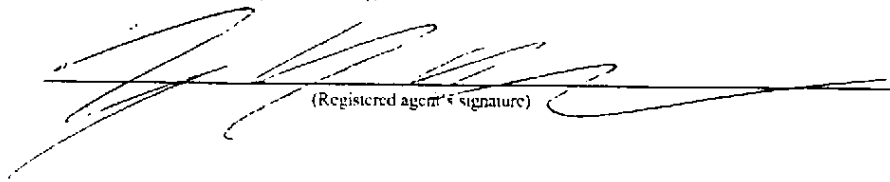
Name: Joseph Herrmann

Office Address: 4556 Woodward Dr

Destin 32541
(City) , Florida (Zip code)

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.


(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:

☐ Manager Name: Dennis Dalton

☒ Member Address: 2589 Country Lake Dr

☐ Authorized Cincinnati, OH 45233

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Kim Dalton

☒ Member Address: 2589 Country Lake Dr

☐ Authorized Cincinnati, OH 45233

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: Name and Address:

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

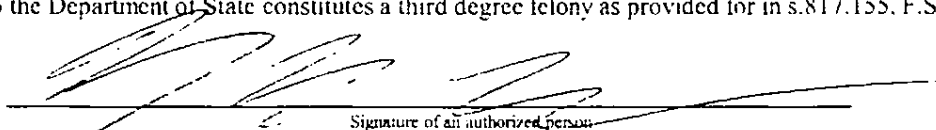
Person _____

☐ 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

Joseph Herrmann

Typed or printed name of signee

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2010 MAR -6 PM 4:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show SURFSIDE INVESTMENTS, LLC, an Ohio For Profit Limited Liability Company, Registration Number 4291534, was organized within the State of Ohio on February 7, 2019, is currently in FULL FORCE AND EFFECT upon the records of this office.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 6th day of February, A.D. 2020.

A handwritten signature in cursive script, appearing to read "Frank LaRose".

Ohio Secretary of State

Validation Number: 202003701512