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(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	<del>:</del> #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT:	Ava Holdings, LLC		
, ciace i		of Limited Liability Company	
The enclosed Existence, a	d "Application by Foreign Limited Liability C nd check are submitted to register the above re	Company for Authorization to Transact Business in Florida, eferenced foreign limited liability company to transact busing	" Certificate of ness in Florida.
Please return	n all correspondence concerning this matter to	the following:	
	Abraham Reichbach		
		Name of Person	
	Ava Holdimngs, LLC		
		Firm/Company	
	3803 Gulf Blvd		
		Address	
	St Pete Beach, FL, 33706		
	Ci	ty/State and Zip Code	
	izabella@summerdale.com		
	E-mail address: (to be	used for future annual report notification)	,
For further i	information concerning this matter, please call	ł:	
lza	abella Gluchowski	727 201-2832 at ()	_
	Name of Contact Person	Area Code Daytime Telephone Number	
Re	ailing Address: egistration Section vision of Corporations	Street Address: Registration Section Division of Corporations	
	O. Box 6327 illahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTMENT OF STATE

## 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:

name unavailable, enter alternate i	name adopted for the purpose of transacting business	s in Florida. The alternate name must include "Limited Liability Company," "L.L.C," o
Delaware		47-5181156
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(FEI number, if applicable)
September 30, 2015		
	(Date first transacted business in Florida, if pr (See sections 605.0904 & 605.0905, F.S. to de	nor to registration.) etermine penalty liability)
3803 Gulf Blvd		Same as Mailing
reet Address of Principal Office)		6. (Mailing Address)
St Pete Beach, FL, 337	706	Zie <b>s</b> e
Service Deach, 1 C. 337		
		10 to
		<del></del>
N1	as of Florida anniatored quenty (P.O.	Por NOT accentable)
Name and street addre	ss of Florida registered agent: (P.O.	
Name and street addre		Silver acceptance
Name and street address Name:	ss of Florida registered agent: (P.O.  Abraham Reichbach	Sit w
	Abraham Reichbach	Silver acceptance
		Silver acceptance
Name:	Abraham Reichbach	Silver acceptance

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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name: Lyta Reichbach Estate Name: Abraham Reichbach □Manager ■ Manager 3803 Gulf Blvd Address: \_\_\_ 3803 Gulf Blvd Address: \_ □Member □Member St Pete Beach, FL. 33706 St Pete Beach, FL. 33706 ☐ Authorized ☐ Authorized Person Person Other\_\_\_\_ **■**Other\_\_ Other\_\_ □Other Name: \_\_\_\_\_ The Second Neil Orkin Alaska Tri ■ Manager □Manager Name: Address: 3803 Gulf Blvd Address: ☐ Member St Pete Beach, FL. 33706 ☐ Authorized ☐ Authorized Person Person □Other\_\_\_\_\_ □Other □Other\_\_\_\_ □Other \_\_\_\_\_ ☐ Manager Name: \_\_\_\_\_ □Manager Name: \_\_\_\_\_ Address: Address: □Member ☐ 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. Lam 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 signer

Abraham Reichbach

Page 1



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

DELAWARE, DO HEREBY CERTIFY "AVA HOLDINGS 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 THIRD DAY OF MARCH, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AVA HOLDINGS LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF SEPTEMBER, A.D. 2015.

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

Authentication: 202502436

Date: 03-03-20

5835678 8300

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SR# 20201871791