

UL-751X

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Ultra - Technologies, 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:

Joel A. Bello  
Name of Person

Joel Bello, P.A.  
Firm/Company

2850 S. Douglas Road, Suite 303  
Address

Coral Gables, FL 33134  
City/State and Zip Code

JBello@BMRLawgroup.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joel A. Bello at ( 305 ) 445-2011  
Name of Contact Person Area Code Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section  
Division of Corporations  
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**

☐ \$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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 20, 2020

JOEL A BELLO  
2850 S DOUGLAS RD STE 303  
CORAL GABLES, FL 33134

SUBJECT: ULTRA TECHNOLOGIES, LLC  
Ref. Number: W20000029640

We have received your document for ULTRA TECHNOLOGIES, 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.

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.

Tracy L Lemieux  
Regulatory Specialist II

Letter Number: 520A00006140

RECEIVED  
APR 03 2020

**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. Ultra - Technologies, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

ULTRA-TECHNOLOGIES SOUTH, 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. Wyoming 3. 84-5102468  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 1712 Pioneer Ave. 6. 1712 Pioneer Ave.  
(Street Address of Principal Office) (Mailing Address)

Suite 7000 Suite 7000  
Cheyenne, WY 82001 Cheyenne, WY 82001

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

Name: Joel A. Bello

Office Address: 2850 S. Douglas Rd. Ste. 303

Coral Gables, Florida 33134  
(City) (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.

Joel A. Bello  
(Registered agent's signature)

FILED  
2004 APR -3 PM 3:52  
CLERK OF DISTRICT COURT  
MELANIE ROBERTS

<p><b><u>Title or Capacity:</u></b></p> <p><input type="checkbox"/> Manager      Name: <u>Christina Horton</u></p> <p><input type="checkbox"/> Member      Address: <u>1712 Pioneer Ave.</u></p> <p><input checked="" type="checkbox"/> Authorized      <u>Suite 115</u></p> <p>Person      <u>Cheyenne, WY 82001</u></p> <p><input type="checkbox"/> Other _____      <input type="checkbox"/> Other _____</p>	<p><b><u>Title or Capacity:</u></b></p> <p><input type="checkbox"/> Manager      Name: <u>Joel A. Bello</u></p> <p><input type="checkbox"/> Member      Address: <u>2850 S. Douglas Rd.</u></p> <p><input checked="" type="checkbox"/> Authorized      <u>Suite 303</u></p> <p>Person      <u>Coral Gables, FL 33134</u></p> <p><input type="checkbox"/> Other _____      <input type="checkbox"/> Other _____</p>
<p><input type="checkbox"/> Manager      Name: _____</p> <p><input type="checkbox"/> Member      Address: _____</p> <p><input type="checkbox"/> Authorized      _____</p> <p>Person      _____</p> <p><input type="checkbox"/> Other _____      <input type="checkbox"/> Other _____</p>	<p><input type="checkbox"/> Manager      Name: _____</p> <p><input type="checkbox"/> Member      Address: _____</p> <p><input type="checkbox"/> Authorized      _____</p> <p>Person      _____</p> <p><input type="checkbox"/> Other _____      <input type="checkbox"/> Other _____</p>
<p><input type="checkbox"/> Manager      Name: _____</p> <p><input type="checkbox"/> Member      Address: _____</p> <p><input type="checkbox"/> Authorized      _____</p> <p>Person      _____</p> <p><input type="checkbox"/> Other _____      <input type="checkbox"/> Other _____</p>	<p><input type="checkbox"/> Manager      Name: _____</p> <p><input type="checkbox"/> Member      Address: _____</p> <p><input type="checkbox"/> Authorized      _____</p> <p>Person      _____</p> <p><input type="checkbox"/> Other _____      <input type="checkbox"/> Other _____</p>

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

Joel A. Bello

Typed or printed name of signee

**STATE OF WYOMING**  
**Office of the Secretary of State**

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,


**Ultra-Technologies, LLC**  
is a  
**Limited Liability Company**

formed or qualified under the laws of Wyoming did on **October 29, 2019**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2019-000883004**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 6th day of March, 2020 at 2:39 PM. This certificate is assigned ID Number 035199132.



  
Secretary of State