## M20000004299

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer: 5/6/20 Peoceved Corvect Cert.				
Sholzo Peoceved Correct Cert.				

Office Use Only



04/13/20--01003--018 ++130.00

FILED

## COVER LETTER

TO:	<b>Registration Section</b>
	Division of Corporations

Domus Urbana LLC

SUBJECT:

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:

	Name of Person
NJR Construction Group LLC	
	Firm/Company
460 3rd St North	
	Address
St. Petersburg, FL 33701	
	City/State and Zip Code
natalie@njrdevelopment.com	20
E-mail address: (to	be used for future annual report notification)
er information concerning this matter, please e	all:
Natalie Gomez	214 543-3744
Name of Contact Person	Area Code Daytime Telephone, Number
Mailing Address: Registration Section	Street Address: 22 22 22 22 22 22 22 22 22 22 22 22 22
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303	

Certified Copy

of Status & Certified Copy

Certificate of Status

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

## IN COMPLANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN-LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Domus Urbana LLC					
(Name of Foreign	Limited Liability Company; must include "Limite	d Liability Co	ompany," "L.L.C.," or "LLC	.**)	
(If name unavailable, enter alternate i	name adopted for the purpose of transacting business in F	forida. The alte	rnate name musi include "Limite	d Liability Company," "L.L.C," or "LI.C.")	
Delaware 2.		8. 3.	5-0572223		
Uurisdiction under the law of w	(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI n	(Flit number, if applicable)	
have not begun transac	cting business				
r	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration.) ine penalty liab	ahty)		
460 3rd St. North 5.		46	0 3rd St. North		
(Street Address of Principal Office)			(Mailing Address)		
St. Petersburg, FL 33701		St.	St. Petersburg, FL 33701		
				20	
<ol> <li>Name and <u>street addres</u></li> </ol>	ss of Florida registered agent: (P.O. Box	<u>NOT</u> ace	eptable)		
Name:	Natalic Gomez			P P ₹ 5	
Office Address:	460 3rd St. North			27 27 28 27	
	St. Petersburg, FL		33701 Florida		
	(City)		(Zip code	e)	

**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.

Matale Generation (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:	<u>Title or Capacity:</u>	Name and Address:
Manager	Neil Rauenhorst	□Manager	Name:
□Member	Address:	□Member	Address:
Authorized	Tampa, FL 33609	□Authorized	
Person		Person	
Other	Other	Other	Other
Manager	Name:	□Manager	Name:
Member	Address:	Member	Address:
Authorized		□Authorized	
Person		Person	20
⊡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.

W

Signature of an authorized person

Neil Rauenhorst, President



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "DOMUS URBANA LLC", FILED IN THIS OFFICE ON THE SECOND DAY OF APRIL, A.D. 2020, AT 12:28 O'CLOCK P.M.



7922746 8100 SR# 20202550577

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You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202705522 Date: 04-02-20

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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 21, 2020

NATALIE GOMEZ 460 3RD ST NORTH ST. PETERSBURG, FL 33701 US

SUBJECT: DOMUS URBANA LLC Ref. Number: W20000039243

We have received your document for DOMUS URBANA LLC and check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Laura D Chang Regulatory Specialist II

Letter Number: 720A00008280

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