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(Requestor's Name)

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2020 MAY 15 PM 8:21

SRF
5/21/20

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Advanced Cleaning & Coating Solutions 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:

Kalpesh Govind

Name of Person

Advanced Cleaning & Coating Solutions

Firm/Company

~~1896 S US Hwy 83~~

3568 park ridge circle

Address

~~Zapata TX 78076~~

Sarg Sola FL 34243

City/State and Zip Code

Rhoteldev@gmail.com

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

For further information concerning this matter, please call:

Kalpesh Govind

210

7251857

at ()

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

2020 JAN 15 PM 6:21

**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. Advanced Cleaning & Coating Solutions LLC.

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

ACCS Florida 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. Texas

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

3. 84-4597196

(FEI number, if applicable)

4. None

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

5. 1896 S US. HWY 83

(Street Address of Principal Office)

6. 3568 Parkridge Circle

(Mailing Address)

Zapata TX 78076

Sarasota FL 34243

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

Name: Kalpesh Govind

Office Address: 3568 Parkridge Circle

Sarasota

(City)

Florida

34243

(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)

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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]:

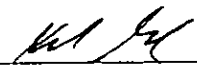
<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: <u>Kalpesh Govind</u>	<input type="checkbox"/> Manager	Name: <u>Gabriel Chavira</u>
<input type="checkbox"/> Member	Address: <u>1896 S US Hwy 83</u>	<input checked="" type="checkbox"/> Member	Address: <u>8903 Oakwood Park</u>
<input type="checkbox"/> Authorized	<u>Zapata TX 78076</u>	<input type="checkbox"/> Authorized	<u>San Antonio TX 78076</u>
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: <u>Kalpesh Govind</u>	<input type="checkbox"/> Manager	Name: _____
<input checked="" type="checkbox"/> Member	Address: <u>1896 S US Hwy 83</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	<u>Zapata TX 78076</u>	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

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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
 Kalpesh Govind

 Typed or printed name of signer



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Advanced Cleaning & Coating Solutions LLC (file number 803536708), a Domestic Limited Liability Company (LLC), was filed in this office on February 04, 2020.

It is further certified that the entity status in Texas is in existence.

It is further certified that our records indicate KALPESH GOVIND as the designated registered agent for the above named entity and the designated registered office for said entity is as follows:

1896 S. US HWY. 83

ZAPATA, TX - 78076 USA

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on May 12, 2020.



A handwritten signature of Ruth R. Hughs in black ink.

Ruth R. Hughs
Secretary of State

2020 MAY 15 PM 8:22



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 6, 2020

KALPESH GOVIND
1896 S US HWY 83
ZAPATA, TX 78076 US

SUBJECT: ADVANCED CLEANING & COATING SOLUTINS, LLC
Ref. Number: W20000044910

We have received your document for ADVANCED CLEANING & COATING SOLUTINS, LLC and your check(s) totaling \$160.00. 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: 520A00009336

Updated correspondence address
3568 Parkridge Circle
Sarasota FL 34243

RECEIVED
MAY 15 2020