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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 25, 2020

FLORIDA FILING & SEARCH SERVICES, INC.

SUBJECT: LIL ROMEO LLC Ref. Number: W20000064877

We have received your document for LIL ROMEO LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$1610.00.

1610.00PLEASE SELECT TITLE FOR EACH MEMBER OF THIS ENTITY,

please kell original date. Thank you

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) 245-6052.

Tacarri K Glass Regulatory Specialist II

Letter Number: 720A00012551

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

6/24/20

NAME:

LIL ROMEO LLC

TYPE OF FILING: APPLICATION

COST:

125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE A HODGE

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. LIL ROMEO LLC	Limited Liability Company; must include "Limite	. Hiskilia. Comas	and Care at Car	
(Name of Foreign	Limited Liability Company; must include Limite	а главину Сотра	ly, Little, or litte.	
(If name unavailable, enter alternate	name adopted for the purpose of transacting business in F	lorida. The alternate n	ame must include "Limited Liability Con	npany," "L.L.C." or "LLC.
NY				
2. (Jurisdiction under the law of w	hich foreign limited liability company is organized)	3	(FEI number, if appli	cable)
06/25/2020				
4.	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration.)		
9481 EDEN ROC COURT		9481 E	EDEN ROC COURT	
5. (Street Address of Principal Office)		6(M	siling Address)	
DELRAY BEACH, FL 33446		DELRAY BEACH, FL 33446		
	, 			13
				· · ·
7. Name and street address	ss of Florida registered agent: (P.O. Bo	NOT acceptal	ble)	رد.
Name:	LEE SIMON			: - 1
	9481 EDEN ROC COURT			
Office Address:				
	DELRAY BEACH		33446 . Florida	
	(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.

(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: Title or Capacity: Name and Address: LEE SIMON Name: □Manager □Manager Name: 9481 EDEN ROC COURT Member Address: DELRAY BEACH, FL 33446 ☐ Authorized ☐ Authorized Person Person Other_____ Other____ □Other_____ Other____ Name: □Manager Name: □Manager ☐ Member □Member Address: Address: ☐ Authorized □ Authorized Person Person Other____ Other__ Other_ ☐Other____ Manager Manager Address: ____ □Member □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. 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. 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 LEE SIMON

Typed or printed name of signee

State of New York Department of State } ss:

I hereby certify, that LIL ROMEO LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 05/22/2012, and that the Limited Liability Company is existing so far as shown by the records of the Department. I further certify the following:

A Certificate of Publication of LIL ROMEO LLC was filed on 08/14/2013.

Certificate of Change was filed on 07/12/2017.

A Biennial Statement was filed 06/23/2020.

I further certify, that no other documents have been filed by such Limited Liability Company.



Witness my hand and the official seal of the Department of State at the City of Albany, this 23rd day of June two thousand and twenty.

Braden C Hydra

Brendan C. Hughes
Executive Deputy Secretary of State

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