Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your brow	wser from this page. Doing
so will generate another cover sheet.	

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017 Phone : (855)498-5500

Fax Number : (800) 432-3622

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

<b>77</b>	4	1	Address:	
r.m.a	1		MILLEDS.	

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## Foreign Limited Liability Company OKO REALTY LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

Help

## **COVER LETTER**

OKO REALTY LLC  JECT:	
Name	of Limited Liability Company
enclosed "Application by Foreign Limited Liability C ence, and check are submitted to register the above r	Company for Authorization to Transact Business in Florida," Conferenced foreign limited liability company to transact business
se return all correspondence concerning this matter to	the following:
FRAN SCOLA	
	Name of Person
OKO GROUP LLC	ان ا
	Firm/Company
4100 NE 2ND AVENUE, SUITE 307	<b>क</b> े
	Address
MIAMI, FLORIDA 33137	
C	ity/State and Zip Code
FSCOLA@OKOGROUP.COM	
E-mail address: (to be	used for future annual report notification)
further information concerning this matter, please ca	at ( )
Name of Contact Person	Area Code Daytime Telephone Number
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	D. DEWENT OF STATE
Please make check payable to: FLORIDA DE	ee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, ∪
Certificate	

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

IN COMPLIANCE WITH SECT. COMPANYTO TRANSACT BUS	TON 605.0902, FLORIDA STATUTES, THE FOL SINESS IN THE STATE OF FLORIDA:	LOWING IS SUBMITTED TO	REGISTER A FOREIGN L	IMMTED LIABILITY 3
, OKO REALTY LLC				_ "T
(Name of Foreign L	imited Liability Company; must include "Limited I	inbility Company," "L.L.C.," or	"ILC")	30
(If mone unevailable, enter afternate to	ame adopted for the purpose of transacting business in Flori	da. The alternate name must include	"Limited Liability Company," "L.	LCor LLC.")
DELAWARE		3.	-11	<u> </u>
2. (Jurisdiction under the law of wh	ich foreign limited liability company is organized)	J	(FEI number, if applicable)	1,1
4	(Date first transacted business in Florids, if prior to re (See sections 605.0904 & 603.0905, F.S. to determine	gistration.) pensity liability)		
4100 NE 2ND AVENU	JE, SUITE 307	4100 NE 2ND AVI	ENUE, SUITE 307	
5. (Street Address of Principal Office)		6. (Mailing Address)		<del></del>
MLAMI, FLORIDA 33	137	MIAMI, FLORIDA	X 33137	
<del> </del>	<u></u>			
		<u> </u>		
7. Name and street address	is of Florida registered agent: (P.O. Box	NOT acceptable)		
Name:	Capitol Corporate Services, Inc.			
Office Address:	515 BAST PARK AVENUE 2ND FL			
	TALLAHASSEE	32 , Florida	2301	
	(City)	<u> </u>	(Zip code)	
designated in this applicate to comply with the provis	otance: egistered agent and to accept service of p ation, I hereby accept the appointment as dons of all statutes relative to the proper as of my position as registered agent.	s remsieren avent anu uvi	EE ID ALL ME WIED COMPACION	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Murl (Regimered agent's	nignature) y che hi	ood Assist.	٧٤.

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:
■Manager	Name: VANESSA GROUT	□Manager	Name: ROCK INVESTMENT U.S.
	Address: 4100 NE 2ND AVENUE	■Member	REALTY HOLDINGS, LLC
□Authorized	SUITE 307	☐ Authorized	Address: 4100 NE 2ND AVENUE
Person	MIAMI, FLORIDA 33137	Person	SUITE 307, MIAMI, FLORIDA 33137.
Other	□Other	Other	11 o o
□Manager	Name: FRANCIS H. SCOLA, III	☐Manager	Name: A. OKTAY CINI
□Member	Address:A100 NE 2ND AVENUE	□Member	Address: 4100 NE 2ND AVENUE
■ Authorized	SUITE 307	<b>■</b> Authorized	SUITE 307
Person	MIAMI, FLORIDA 33137	Person	MIAMI, FLORIDA 33137
Other	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.

242		
	Signature of an authorized person	
FRANCIS H. SCOLA, III		
	Typed or pointed name of signer	

## <u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "ORO REALTY 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 OFFI

THE THIRTIETH DAY OF JUNE, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ONO REALTY LLC".

WAS FORMED ON THE THIRTIETH DAY OF JUNE, A.D. 2020.

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

3159357 8300
SR# 20205988462
You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203200699

Date: 06-30-20