

N20000006761

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W20000080688

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2020 AUG -4 PM 4:56  
TALLAHASSEE, FLORIDA

YS  
8/5/20 ✓



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 28, 2020

MONIQUE D. BROWN  
31 W 20TH STREET  
SUITE:200  
RIVIERA BEACH, FL 33404

SUBJECT: LAMOB REAL ESTATE INVESTMENT LLC  
Ref. Number: W20000080688

We have received your document for LAMOB REAL ESTATE INVESTMENT LLC and your check(s) totaling \$125.00. 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.

Yvette Scott  
Document Specialist II

Letter Number: 520A00014091

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LAMOBRE REAL ESTATE INVESTMENT 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:

MONIQUE D BROWN

Name of Person

LAMOBRE REAL ESTATE INVESTMENT LLC

Firm/Company

31 W 20TH STREET, SUITE 200

Address

RIVIERA BEACH FL 33404

City/State and Zip Code

mowellons@changescenter.org

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

For further information concerning this matter, please call:

MONIQUE D BROWN

561

201-0232

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

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2020 AUG -4 PM 4:56  
TALLAHASSEE, FLORIDA

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. LAMOBRE REAL ESTATE INVESTMENT LLC

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

3. 85-1472312

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

(F.L.I. number, if applicable)

4. JULY 1, 2020

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

5. 651 N BROAD STREET

(Street Address of Principal Office)

6. 31 W 20TH STREET

(Mailing Address)

SUITE 206 #2532

SUITE 200

MIDDLETOWN, DE 19709

RIVIERA BEACH FL 33404

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

Name: MONIQUE BROWN

Office Address: 31 W 20TH STREET

RIVIERA BEACH

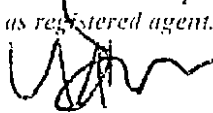
(City)

Florida 33404

(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:

☐ Manager Name: MONIQUE BROWN

☒ Member Address: 651 N BROAD ST

☐ Authorized SUITE 206 #2354

Person MIDDLETOWN, DE 19709

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: JAILYA WOODEN

☒ Member Address: 651 N BROAD ST

☐ Authorized SUITE 206 #2354

Person MIDDLETOWN, DE 19709

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

Title or Capacity: Name and Address:

☐ Manager Name: HARRY FAUST JR

☒ Member Address: 651 N BROAD ST

☐ Authorized SUITE 206 #2354

Person MIDDLETOWN, DE 19709

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

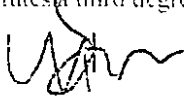
Person \_\_\_\_\_

☐ 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.



Signature of an authorized person

Monique D Brown

\_\_\_\_\_  
Print or print name of person

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LAMOBE REAL ESTATE INVESTMENT 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 OF THE TWENTY-NINTH DAY OF JULY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LAMOBE REAL ESTATE INVESTMENT LLC" WAS FORMED ON THE TWELFTH DAY OF JUNE, A.D. 2020.

2020 AUG -4 PM 1:56  
J. W. BULLOCK, SECRETARY OF STATE



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SR# 20206466616

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 203371182

Date: 07-29-20