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(Address)

(Address)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Mile High 337 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:

Rosemary Marshall

Name of Person

Mile High 337 LLC

Firm/Company

7901 4th St N, STE 300

Address

St. Petersburg, FL 33702

City/State and Zip Code

dave@mainstreetholdings.net

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

For further information concerning this matter, please call.

David Svec

323 363-6455

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

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

IN COMPLIANCE WITH SECTION 605.902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Mile High 337 LLC

(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," or "LLP")

(If name and a label, either one state name, adopted for the purpose of transacting business in Florida. The name must include "Limited Liability Company," "LLC," or "LLP")

Delaware

85-2454653

2. Jurisdiction under the law of which foreign limited liability company is organized:

(If more than one, list all)

Not Transacting Business Yet

4. (Date first transacted business in Florida, if none, no registration)
(If more than one, list all)

8 The Green

1000 Fifth Street

5. Street Address of Principal Office:

6. Mailing Address

Suite A

STE 1000 - H8

Dover, DE 19901

Miami Beach, FL 33139

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

Name: Registered Agents Inc

Office Address: 7901 4th St N, STE 300

St Petersburg 33702
Florida

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.

Bill Name
Registered Agent's Signature

<p><u>Title or Capacity:</u></p> <p><input type="checkbox"/> Manager Name: <u>Rosemary Marshall</u></p> <p><input checked="" type="checkbox"/> Member Address: <u>1000 5th Street</u></p> <p><input type="checkbox"/> Authorized <u>Ste 200 H-8</u></p> <p> <u>Miami Beach, FL 33139</u></p> <p><input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____</p>	<p><u>Title or Capacity:</u></p> <p><input type="checkbox"/> Manager Name: <u>David A. Syce</u></p> <p><input type="checkbox"/> Member Address: <u>3941 Tamiami TRL</u></p> <p><input checked="" type="checkbox"/> Authorized <u>Unit 3157 #76</u></p> <p> <u>Punta Gorda, FL 33950</u></p> <p><input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____</p>
<p><input type="checkbox"/> Manager Name: _____</p> <p><input type="checkbox"/> Member Address: _____</p> <p><input type="checkbox"/> Authorized _____</p> <p> _____</p> <p><input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____</p>	<p><input type="checkbox"/> Manager Name: _____</p> <p><input type="checkbox"/> Member Address: _____</p> <p><input type="checkbox"/> Authorized _____</p> <p> _____</p> <p><input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____</p>
<p><input type="checkbox"/> Manager Name: _____</p> <p><input type="checkbox"/> Member Address: _____</p> <p><input type="checkbox"/> Authorized _____</p> <p> _____</p> <p><input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____</p>	<p><input type="checkbox"/> Manager Name: _____</p> <p><input type="checkbox"/> Member Address: _____</p> <p><input type="checkbox"/> Authorized _____</p> <p> _____</p> <p><input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____</p>

Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MILE HIGH 337 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 EIGHTH DAY OF SEPTEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MILE HIGH 337 LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF AUGUST, A.D. 2011.

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



5028830 8300

SR# 20207141312

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

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 203607135

Date: 09-08-20