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Southern Investments Group I, LLC		
UBJECT:		
Nai	me of Limited Liability Company	
	v Company for Authorization to Transact Business in Florida." e referenced foreign limited liability company to transact busin	
lease return all correspondence concerning this matter	to the following:	
Lis Fernandez Matheu		
	Name of Person	
	Firm/Company	
11507 SW 124 Place		
	Address	
Miami, FL 33186		
	City/State and Zip Code	
lis.matheu@gmail.com		
E-mail address: (to	be used for future annual report notification)	
or further information concerning this matter, please c	all:	77
Lis Fernandez Matheu	786 255-9124	2070 Line - 9 Pit Wi
Name of Contact Person	Area Code Daytime Telephone Number	5
Mailing Address:	Street Address:	70
Registration Section	Registration Section	 ستد
Division of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	c
rananassee, FL 32314	Tallahassee, FL 32303	
Enclosed is a check for the following amount:		

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

IN COMPLANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Southern Investments Group 1, LLC

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

f name unavailable, enter alternate i	name adopted for the purpose of transacting business in Flor	ida. The alternate name must include "Limited Liability Co	ompany," "L. L.C," or "Li	
Delaware		85-3195504		
(Jurisdiction under the law of which foreign limited liability company is organized)		3. (FEI number, if applicable)		
09-17-2020				
	(Date first transacted business in Florida, if prior to re (See sections 605,0904 & 605,0905, F.S. to determine	gistration) penulty liability)		
11507 SW 124 PL		11507 SW 124 PL 6.		
eet Address of Principal Office)		6. (Mailing Address)		
Miami, FL 33186		Miami, FL 33186		
			(~)	
Name and street addres	s of Florida registered agent: (P.O. Box	<u>NOT</u> acceptable)	6- JH 0707	
Name:	Lis Fernandez Matheu			
ivaine:			 1	
Office Address:	11507 SW 124 PL			
	Miami	33186		
		. 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.

(Zip code)

Many (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: Name: Lis Fernandez Matheu ■Manager □Manager Name: _____ Address: ______ 11507 SW 124 PL ■Member □Member Address: Miami, FL 33186 Authorized □Authorized Person Person □Other □Other____ □Other___ □Other____ □Manager Name: □Manager Name: _____ □Member Address: _____ □Member Address: _____ ☐ Authorized □ Authorized Person Person □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: 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. figuature of an authorized person

Typed or printed name of signee

Lis Fernandez Matheu

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SOUTHERN INVESTMENTS GROUP I, LLC" IS

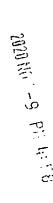
DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE FOURTH DAY OF NOVEMBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOUTHERN INVESTMENTS GROUP I, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF SEPTEMBER, A.D. 2020.

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





Authentication: 204005736

Date: 11-04-20

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