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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

Email Address:______

JAN-6 PM 3: 1

Foreign Limited Liability Company Colorbiotics, LLC

Certificate of Status	U
Certified Copy	[1
Page Count	04
Estimated Charge	\$155.00

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Corporate Filing Menu

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SAL

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

maine unavallable, enter alternate	name adopted for the purpose of transacting business in Fl	orica. The alternate name must include "Lamated Liability C	ompany," "L L.C," or "L1.C,")		
Delaware		85-3903276 3			
(Jurisdiction under the law of v	which foreign limited liability company is organized)	(Ft! number, it applicable)			
1/1/2020					
	(Date first transacted business in Florida, if prior to a (See sections 605,0904 & 605,0905, F.S. to determine	egistration) re penalty frability)			
23700 Chagrin Blvd.		23700 Chagrin Blvd.			
eet Address of Principal Office)		6. (Mailing Address)			
Beachwood, OH, 44122		Beachwood, OH, 44122			
· 1.5					
	<u></u>				
Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)	JAN -6		
Name:	C T Corporation System				
Office Address:	1200 South Pine Island Road		5: 27 0::10/		
	Plantation	33324			
	(City)	, Florida (Zip code)			

(Registered agent's signange)

From: Ranae Mc

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: LSF11 Skyseraper US Bideo 2 LLC Series 3	• Manager	Name: Brian Denys	
⊠Member	Address: 23700 Chagrin Blvd.	□Member	Address: 23700 Chagrin Blvd.	
□Authorized	Beachwood, OH, 44122	□Authorized	Beachwood, OH, 44122	
Person		Person		
□Other	Other	□Other	Other	
■ Manager ■ Member ■ Authorized Person ■ Other	Name: Donald Kehr Address: 23700 Chagrin Blvd. Beachwood, OH, 44122	☐ Manager ☐ Member ☐ Authorized Person ☐ Other	Name: Address: Other	ヤートト
☐Manager ☐Member ☐Authorized Person	Name:	☐ Manager ☐ Member ☐ Authorized Person	Name:	
□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.

and	
Signature of an authorized person	
Donald Kehr, Manager	
Typed or printed name of signee	

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Page 1

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

DELAWARE, DO HEREBY CERTIFY "COLORBIOTICS, 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 SIXTH DAY OF JANUARY, A.D. 2021.

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

TILLU 2021 JAN -6 PH 5: 28 SECNSIANE SELOMO



4121772 8300

SR# 20210034977

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

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Authentication: 202225588

Date: 01-06-21