

1/14/2021

Kim Tadlock 8004323622

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Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

M210000194023

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(((H21000019402 3)))



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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
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.

Email Address: _____

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2021 JAN 19 PH 2:15

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2021 JAN 19 PH 5:40
TALLAHASSEE, FLORIDA

Foreign Limited Liability Company
CFC OFFICES, LLC

FILE SECOND - FILE AFTER THE DISSOLUTION FOR CFC OFFICES, LLC

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$160.00

Electronic Filing Menu

Corporate Filing Menu

Help

SAI

H21000019364 3

CFC OFFICES, LLC
9111 TILLINGHAST DRIVE
TAMPA, FL 33626


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2021 JAN 19 PM 5:40
TALLAHASSEE, FLORIDA

Name: CFC Offices, LLC
Florida Document Number: L20000384987

The undersigned does not plan on revoking the dissolution of the above Florida limited liability company and consents to CFC Offices, LLC, a Delaware limited liability company, to be filed as a foreign limited liability company in Florida.

Dated this 14th day of January, 2021.

CFC Offices, LLC

By: 
Name: Fred Arena
Title: Manager

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

2. Delaware 3. 86-1317841
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. Upon Filing
(Date first transacted business in Florida, if prior to registration. (See sections 605.0904 & 605.0903, F.S. to determine penalty liability.)

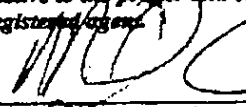
5. 9111 Tillinghast Drive 6. 9111 Tillinghast Drive
(Street Address of Principal Office) (Mailing Address)
Tampa, FL 33626 Tampa, FL 33626

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

Name: Fred Arona
Office Address: 9111 Tillinghast Drive
Tampa, Florida 33626
(City) (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)

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TALLAHASSEE, FLORIDA

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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):

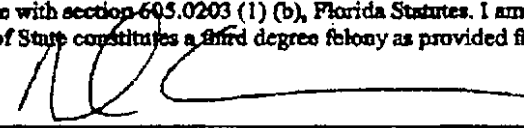
<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: Fred Arena	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: 9111 Tillingham Drive	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized Person	Tampa, FL 33626	<input type="checkbox"/> Authorized Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized Person	_____	<input type="checkbox"/> Authorized Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized Person	_____	<input type="checkbox"/> Authorized Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

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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

Fred Arena

Typed or printed name of signer

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CFC OFFICES, 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 FOURTEENTH DAY OF JANUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CFC OFFICES, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF DECEMBER, A.D. 2020.

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

2021 JAN 19 PM 5:40
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

FILED



Jeffrey W. Bullock
Jeffrey W. Bullock, Secretary of State

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SR# 20210116784

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

Authentication: 202290935

Date: 01-14-21