

W210000000946

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

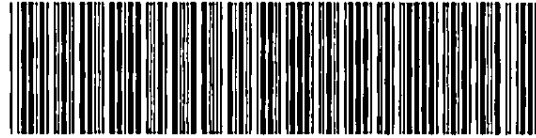
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W210000002374

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TALLAHASSEE, FL

US
1/26/21





FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 10, 2021

AMBER MONDOCK, ESQ.
3201 TAMiami TRAIL N
2ND FLOOR
NAPLES, FL 34103

SUBJECT: CKK HOMES, LLC
Ref. Number: W21000002374

We have received your document for CKK HOMES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE DOCUMENT IS ILLEGIBLE AND NOT ACCEPTABLE FOR IMAGING,

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: 021A00000494

RECEIVED

JAN 21 2021

LAW OFFICE
OF
CONRAD WILLKOMM, P.A.

3201 TAMiami TRAIL NORTH • 2ND FLOOR • NAPLES, FLORIDA 34103

January 20, 2021

VIA UPS Ground

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Ste. 810
Tallahassee, FL 32303

**RE: Matter: CKK Homes, LLC – Application by Foreign LLC for Authorization to Transact
Business in Florida
Your Reference No.: W21000002374
Our File No. 20B.1883.AM**

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To Whom It May Concern:

For the above referenced matter enclosed please find:

- Correspondence from the Division of Corporations dated January 10, 2021 (Letter Number 021A00000494);
- Certificate of Status from Ohio Secretary of State for CKK Properties, LLC; and
- Legible Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida.

If you have any questions, please do not hesitate to contact our office. Thank you for allowing us to be of service to you.

Respectfully,

LAW OFFICE OF CONRAD WILLKOMM, P.A.



**Amber Mondock, Esq.
n.b.**

Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CKK HOMES, 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:

AMBER MONDOCK, ESQ.

Name of Person

LAW OFFICE OF CONRAD WILLKOMM, P.A.

Firm/Company

3201 TAMiami TRAIL N, 2ND FLOOR

Address

NAPLES, FL 34103

City/State and Zip Code

AMBER@SWFLORIDALAW.COM

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

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For further information concerning this matter, please call:

AMBER MONDOCK at (239) 262-5303
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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. CKK PROPERTIES, LLC, an Ohio limited liability company
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

CKK HOMES, 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. Ohio 47-4827317
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 6900 Houston Road #27 6900 Houston Road #27
(Street Address of Principal Office) (Mailing Address)

Florence, KY 41042 Florence, KY 41042

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

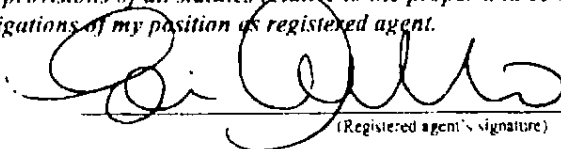
Name: Edis Arevalo

Office Address: 8435 Ibis Cove Cir

Naples 34119
(City) Florida (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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STATE OF FLORIDA

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):

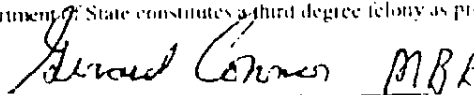
<u>Title or Capacity:</u>		<u>Name and Address:</u>		<u>Title or Capacity:</u>		<u>Name and Address:</u>	
<input type="checkbox"/> Manager	Name:	Gerard Connor		<input type="checkbox"/> Manager	Name:	Nancy Kelly	
<input checked="" type="checkbox"/> Member	Address:	3030 N Rocky Point Drive		<input checked="" type="checkbox"/> Member	Address:	3030 N Rocky Point Drive	
<input type="checkbox"/> Authorized		Suite 150		<input type="checkbox"/> Authorized		Suite 150	
Person		Tampa, FL 33607		Person		Tampa, FL 33607	
<input type="checkbox"/> Other		Other		<input type="checkbox"/> Other		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				<input type="checkbox"/> Authorized			
Person				Person			
<input type="checkbox"/> Other		Other		<input type="checkbox"/> Other		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				<input type="checkbox"/> Authorized			
Person				Person			
<input type="checkbox"/> Other		Other		<input type="checkbox"/> Other		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				<input type="checkbox"/> Authorized			
Person				Person			
<input type="checkbox"/> Other		Other		<input type="checkbox"/> Other		Other	

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 TALLAHASSEE, FL

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
 Gerard Connor, MBR

 Typed or printed name of signer

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show CKK PROPERTIES, LLC, an Ohio For Profit Limited Liability Company, Registration Number 2420817, was organized within the State of Ohio on August 18, 2014, is currently in FULL FORCE AND EFFECT upon the records of this office.

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OFFICE OF THE SECRETARY OF STATE
COLUMBUS, OHIO



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 17th day of December, A.D. 2020.

Frank LaRose

Ohio Secretary of State

Validation Number: 202035201244