

md1000003154

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

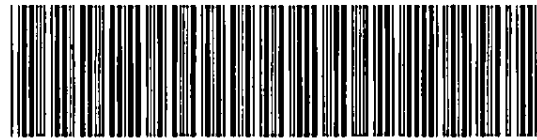
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700359582337

01/01/21-01/01/21 \$190.00

FILED
21 MAR 15 PM 6:19

267-1900
19385

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SOUTH ATLANTIC FUTURES DISBURSEMENT, 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:

JOSEPH PASTRANA

Name of Person

JP GLOBAL SERVICES

Firm/Company

2598 E SUNRISE BLVD SUITE 2104

Address

FORT LAUDERDALE FL 33304

City/State and Zip Code

JOSEPH@JPGLOBAHSVCS.COM

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

For further information concerning this matter, please call:

ROB CROSS

866

574-5622 X714

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 13, 2021

JOSEPH PASTRANA
2598 E SUNRISE BLVD STE 2104
FT LAUDERDALE, FL 33304

SUBJECT: SOUTH ATLANTIC FUTURES DISBURSEMENT, LLC
Ref. Number: W21000019385

We have received your document for SOUTH ATLANTIC FUTURES DISBURSEMENT, 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 321A00003262

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. SOUTH ATLANTIC FUTURES DISBURSEMENT LLC

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

2. DELAWARE STATE

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 86-1883442

(FEI number, if applicable)

4. N/A

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

5. 2140 SOUTH DUPONT HWY

(Street Address of Principal Office)

6. 2598 E SUNRISE BLVD

(Mailing Address)

CAMDEN, DE. 19934

SUITE 2104

FORT LAUDERDALE, FL 33304

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

Name: JP SERVICE GROUP LLC

Office Address: 2598 E SUNRISE BLVD STE 2104

FORT LAUDERDALE

(City)

Florida 33304

(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)

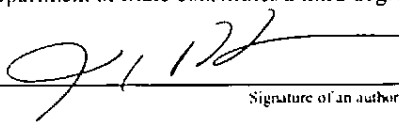
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<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: <u>ALEXANDER G CASTELLUCCI</u>	<input checked="" type="checkbox"/> Manager	Name: <u>CHRISTIAN A CONIGLIO</u>
<input type="checkbox"/> Member	Address: <u>10756 IVANHOE LN</u>	<input type="checkbox"/> Member	Address: <u>2650 NE 11TH TER</u>
<input type="checkbox"/> Authorized	<u>WELLINGTON FL 33414</u>	<input type="checkbox"/> Authorized	<u>POMPANO BEACH FL 33064</u>
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
 <input checked="" type="checkbox"/> Manager	Name: <u>JOSEPH PASTRANA</u>	 <input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: <u>1919 SE 10TH AVE APT 1101</u>	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	<u>FORT LAUDERDALE FL 33304</u>	<input type="checkbox"/> Authorized	_____
Person	_____	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	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> 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.



 Signature of an authorized person
 JOSEPH PASTRANA

 Typed or printed name of signee

Delaware

The First State


Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SOUTH ATLANTIC FUTURES DISBURSEMENT, 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 SEVENTEENTH DAY OF MARCH, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOUTH ATLANTIC FUTURES DISBURSEMENT, LLC" WAS FORMED ON THE SIXTEENTH DAY OF DECEMBER, A.D. 2020.

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




Jeffrey W. Bullock, Secretary of State

4465974 8300

SR# 20210947313

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

Authentication: 202759557

Date: 03-17-21