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(Requestor's Name)				
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PICK- JP WAIT MAIL				
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Certified Copies Certificates of Status				
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Special Instructions to Filing Officer.				

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

2702 South Orange LLC	
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawa)
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
•	Vehicle Search
	Driving Record
Requested by: SETH	UCC 1 or 3 File
Name Date Time	- UCC 11 Search
Matthe Date Title	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

TO:

TO:	Registration Section Division of Corporations					
19112	2702 South Orange LLC					
SUDJ	Name of Limited Liability Company					
The er Existe	nclosed "Application by Foreign Limited Liability Connec, and check are submitted to register the above refe	npany for Authorization to Transact Business in Florida, renced foreign limited liability company to transact busi	" Certificate of ness in Florida			
Please	return all correspondence concerning this matter to the	e following:				
	Sam Herzberg					
	Name of Person					
	2702 South Orange LLC					
	Firm/Company					
	927 Lincoln Road #214					
		Address	201			
	Miami Beach, FL 33139		2021 APR			
	City/State and Zip Code					
	richdo01@aol.com		ω			
	E-mail address: (to be us	ed for future annual report notification)				
For fi	arther information concerning this matter, please call:		126			
Richard Do		305 305-332-2729 at ()	_			
	Name of Contact Person	at () Area Code Daytime Telephone Number	-			
Mailing Address: Registration Section		Street Address: Registration Section				
Division of Corporations		Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee				
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPAR \$\Begin{array}{c} \Boxed{S125.00} \text{ Filing Fee} \Boxed{S130.00} \text{ Filing Fee} Certificate of S					

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: 2702 South Orange 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.") Delaware (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 927 Lincoln Road #214 927 Lincoln Road #214 (Mailing Address) (Street Address of Principal Office) Miami Beach, FL 33139 Miami Beach, FL 33139 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Sam Herzberg Name: 927 Lincoln Road #214 Office Address: Miami Beach 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.

(Registored 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:
□Manager	Name: Sam Herzberg	■Manager	Name: Kook Choo Do
■ Member	Address: 927 Lincoln Road #214	□Member	Address: 927 Lincoln Road #214
□Authorized	Miami Beach, FL 33139	□Authorized	Miami Beach, FL 33139
Person		Person	
□Other	Other	Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	2021
□Other	Other	Other	□Other ♡
			1100
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		☐ Authorized	
Person		Person	
Other	Other	Other	Other
9. Attached is a cer jurisdiction under t of the translator mu 10. This document	Use an attachment to report more than six (6). The smay be added to the index when filing your Flortificate of existence, no more than 90 days old, duthe law of which it is organized. (If the certificate sust be submitted) It is executed in accordance with section 695.0203 ament to the Department of State constitutes a thin	rida Department of Stat luly authenticated by the is in a foreign language (1) (b), Florida Statute	e Annual Report form. e official having custody of records in the e, a translation of the certificate under oath s. I am aware that any false information

Signature of an authorized person

Typed or printed name of signee

Sam Herzberg

Page 1



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

DELAWARE, DO HEREBY CERTIFY "2702 SOUTH ORANGE 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 THIRTEENTH DAY OF APRIL, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "2702 SOUTH ORANGE LLC" WAS FORMED ON THE SECOND DAY OF MARCH, A.D. 2021.

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

Authentication: 202953559

Date: 04-13-21

5331255 8300 SR# 20211271693