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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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	COMPRIENTED	*		
₹	COVER LETTER S	ý	_	
TO: Registration Section Division of Corporations		į		
WashWall A 204 LLC				
WestWall A-206, LLC SUBJECT:				
	Name of Limited Liability Company			
The enclosed "Application by Foreign Limited Li Existence, and check are submitted to register the	iability Company for Authorization to Transact Business in Florida," (e above referenced foreign limited liability company to transact busine	Certific ess in F	ate of lorida	
Please return all correspondence concerning this	matter to the following:			
Richard Wolff				
	Name of Person			
WestWall A-206, LLC				
	Firm/Company :11:	2021		
204 T Daive		APR	=	
294 Trenor Drive		æ 2	4175	
	Address	0	₹ • •	
New Rochelle, NY 10804	ന്ന നന്ന എ <u>സ</u>	PH 3: 04	j 6	
	City/State and Zip Code	у; С		
richardjwolff@houmail.com	LU :	+		
E-mail addres	ss: (to be used for future annual report notification)			
For further information concerning this matter, pl	lease call:			
To the mornador concerning this matter, pr	rease can.			
Richard Wolff	917 548-3770 at ()			
Name of Contact Perso				
Mailing Address:	Street Address:			
Registration Section 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			

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:

	Limited Liability Company; must include "Limited				
f name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	rida. The z	ilternate name must include "Limited Lia	bility Company," "L.L	.C," or "LLC
Colorado		3.	27-2100067		
(Jurisdiction under the law of which foreign limited liability company is organized)		(FE) number, if applicable)			
				a	2(
	(Date first transacted business in Florida, if prior to n (See sections 605.0904 & 605.0905, F.S. to determine	egistration	abilio)	- <u>I</u>)21 AF
294 Trenor Drive	(See Sections 1003.0704 & 1003.0703, 17.3. to the armin		294 Trenor Drive	1-21 7-25 7-35	2021 APR 29
treet Address of Principal Office)	· · · · · · · · · · · · · · · · · · ·	6.	(Mailing Address)		
New Rochelle, NY			New Rochelle, NY	000 Pig Pig	PH 3:
10804		-	10804	FI.	10 1
Name and street addres	s of Florida registered agent: (P.O. Box	<u>NOT</u> a	cceptable)		
Name:	Jeffrey London				
Office Address:	3801 S. Ocean Drive, Unit 6N				
	Hollywood		33019		
	(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)

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: Richard Wolff	□Manager	Name: Laurie Latt Wolff
■Member	Address: 294 Trenor Drive	■Member	Address: 294 Trenor Drive
□Authorized	New Rochelle, NY 10804	□Authorized	New Rochelle, NY 10804
Person		Person	
Other	□Other	□Other	Other
			3 7
□Manager	Name:	□Manager	Name: Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	5.00 E. 141
Person		Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	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.

Signature of an authorized person

Richard J. Wolff

Typed or printed name of signee

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

WestWall A-206, LLC

is a

Limited Liability Company

formed or registered on 03/09/2010 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20101144384.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 04/09/2021 that have been posted, and by documents delivered to this office electronically through 04/13/2021 @ 10:40:02 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed and issued this official certificate at Denver, Colorado on 04/13/2021 @ 10:40:02 in accordance with applicable law This certificate is assigned Confirmation Number 13092603



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http:// www.sov state co.us/ click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."