M21000006471

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Basiliess Ellaty Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



600364262076

04/19/21--01012--028 **130.00

PILED
2021 HAY 26 PM 2: 39
SECRETARY SESTATE

1001/104195 1001/104195



May 11, 2021

ELIZBETH JOHNSON 4665 TUDOR CT SE CONYERS, GA 30094

SUBJECT: HAMILTON INDUSTRIES, LLC

Ref. Number: W21000064695

We have received your document for HAMILTON INDUSTRIES, LLC and check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 121A00009854

Suzanne Hawkes Regulatory II

www.sunbiz.org

the second of th

COVER LETTER

Registration Section

TO:

Divisi	ion of Corporations	
SUBJECT: _		ame of Limited Liability Company
The enclosed " Existence, and	'Application by Foreign Limited Liability check are submitted to register the above	ty Company for Authorization to Transact Business in Florida," Certificate of we referenced foreign limited liability company to transact business in Florida.
Please return a	Il correspondence concerning this matte	er to the following:
	Elizabeth Ja	Name of Person
	Hamilton In	OUST TIES, LLC Firm/Company
	41065 Tudar	Address
	Conyers, GA	3069 U City/State and Zip Code
	elizabeth, John E-mail address: (to	Son Chamilton Federal Com be used for future annual report notification)
For further info	ormation concerning this matter, please	call:
<u>()</u>	Tabeth John 50h Name of Contact Person	at (U) O Daytime Telephone Number
Regis Divis P.O.	ng Address: stration Section sion of Corporations Box 6327 thassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Please	sed is a check for the following amount e make check payable to: FLORIDA D l 25.00 Filing Fee	EPARTMENT OF STATE

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. Hamilton Industrics LUC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")						
Hanilton Wavehuse 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. Vivania (FET number, if applicable) (Furnsdiction Index the law of which foreign limited liability company is organized)						
4. (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)						
5. 2842 County Road 523 6. 2842 County Road 523 (Street Address of Principal Office)						
Suite#10 Suite#10						
wildward FL, 34785 wildward FL, 34785						
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)						
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Bill Prue Office Address: 2223 MOVIDEN Parkussus						
Office Address: 2003 Morven Parkway, The Villages, Florida 30160 PM 30160						
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 turneques]						
(Régistered 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: Mayra kruger	□Manager	Name: Alvin Saavedra
⊡Member	Address: 1818 Cibrary St.	□Member	Address: 1818 Library St.
√Authorized	Suit 500	Authorized	Suit 500
Person	Reston VA, 20190	Person	Reston VA, 20190
□Other	Other	□Other	Other
□Manager	Name: Bill Prul	□Manager	Name: Elizabeth Johnson
□Member	Address: 2842 (punty Pd	□Member	Address: 2842 County 12d.
(L'Authorized	523 Suite #10	(XAuthorized	523 Suite # 10
Person	Wildward FL, 34785	Person	wildward FL, 34785
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□Other	Other	□Other	□Other

<u>Important Notice:</u> 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.

Elizabeth Johnson

Commonwealth of Hirginia



State Corporation Commission

CERTIFICATE OF FACT

1 Certify the Following from the Records of the Commission:

That HAMILTON INDUSTRIES, LLC is duly organized as a limited liability company under the law of the Commonwealth of Virginia;

That the limited liability company was formed on September 21, 2007; and

That the limited liability company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

April 15, 2021

Bernard J. Logan, Clerk of the Commission