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### COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJEC	Epicurean Element, LLC			
3017417		Limited Liability Company		
		apany for Authorization to Transact Business in Florida." Certificate of renced foreign limited liability company to transact business in Florida.		
Please re	eturn all correspondence concerning this matter to the	e following:		
	lvelise McLaurin			
Name of Person				
	irm/Company			
	8742 European Fan Palm Aly			
		Address		
	Winter Garden, FL 34787			
	City/S	State and Zip Code		
	info@epiele.com			
	E-mail address: (to be use	d for future annual report notification)		
For furth	ner information concerning this matter, please call:			
Ivelise McLaurin		703 3001828 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 DEPAR  \$\Boxed{\Pi}\$ \$125.00 Filing Fee \$\Boxed{\Pi}\$ \$130.00 Filing Fee & Certificate of St	☐ \$155.00 Filing Fee & ■ \$160.00 Filing Fee, Certificate		

### 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:

			ny," "L.1. C," or "L1.C.")
Virginia		47-0996355 3	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	3. (Ff.I number, if applicab	le)
N/A			
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(Date first transacted business in Florida, if prior to re (See sections 605,0904 & 605,0905, F.S. to determine	gistration ) r penalty liability)	
5764 N Orange Blosso	om Trl PMB 90782	5764 N Orange Blossom Trl PMB 90	
eet Address of Principal Office)	<u> </u>	6. (Mailing Address)	
Orlando, FL 32810		Orlando, FL 32810	
			<del></del>
Name and <u>street addre</u>	ss of Florida registered agent: {P.O. Box	NQT acceptable)	2021 AND 1021 AND 102
Name and <u>street addre</u>		NOT acceptable)	1021 ABU TO
Name and <u>street addre</u> Name:	ss of Florida registered agent: (P.O. Box   Ivelise McLaurin	N <u>OT</u> acceptable)	
Name:			) (11년 -
	Ivelise McLaurin		) (기원 - 1 (기원 - 1 (기원 - 1
Name:	Ivelise McLaurin  5764 N Orange Blossom Trl PMB 9078		200 C C C C C C C C C C C C C C C C C C

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: Ivelise McLaurin	Manager	Name: Marrio McLaurin	
□Member	Address: 8742 European Fan Palm Aly	□Member	Address: 8742 European Fan Palm Aly	
□Authorized	Winter Garden, FL 34787	□Authorized	Winter Garden, FL 34787	
Person		Person		
□Other	Other	□Other	Other	
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized	<del></del>	□Authorized		
Person		Person		
□Other	Other	□Other	□Other : 2021 AUC	
□Manager	Name:	□Manager	Name:	-
□Member	Address:	□Member	A.	
□Authorized		□Authorized	25 <u>2</u>	٠.
Person		Person	<u> </u>	
□Other	Other	□Other	Other	

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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 Ivelise McLaurin Typed or printed name of signee

# Commonwealth of Hirginia



## State Corporation Commission

#### CERTIFICATE OF FACT

1 Certify the Following from the Records of the Commission:

That Epicurean Element, 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 May 30, 2014; and

That the Limited Liability Company is in existence in the Commonwealth of Virginia as of the date set forth below.

That the limited liability company is current in the payment of all registration fees assessed against it by the Commission pursuant to the Virginia Limited Liability Company Act as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

July 28, 2021

Bernard J. Logan, Clerk of the Commission