# MA1000010684

(Re	equestor's Name)					
(Address)						
(Ad	ddress)					
(Cit	ty/State/Zip/Phone #)					
PICK-UP	WAIT	MAIL				
(Bu	usiness Entity Name)					
(Document Number)						
Certified Copies	_ Certificates of	Status				
Special Instructions to Filing Officer:						
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SA



August 9, 2021

MONTANA RAGOSTA 523 HIGHLAND TERRACE BRICK, NJ 08723

SUBJECT: WORLD DEVELOPMENT GROUP NJ LLC

Ref. Number: W21000110288

We have received your document for WORLD DEVELOPMENT GROUP NJ LLC and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

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

Letter Number: 821A00018805

Suzanne Hawkes Regulatory II

www.sunbiz.org

### COVER LETTER

TO:

TO:	Registration Section Division of Corporations							
SHRI	World Development Group NJ LLC							
0000	Name of Limited Liability Company							
		lity Company for Authorization to Transact Business in Florida," Certificate of ove referenced foreign limited liability company to transact business in Florida.						
Please	return all correspondence concerning this matt	ter to the following:						
	Montana Ragosta							
		Name of Person						
	World Development Group NJ LL	С						
	Firm/Company							
	523 Highland Terrace							
	Address							
	Brick, New Jersey, 08723							
		City/State and Zip Code						
	ragostamontana@gmail.com							
	E-mail address: (t	o be used for future annual report notification)						
For fu	rther information concerning this matter, please	e call:						
Montana Ragosta		619 917-4504 at ( )						
	Name of Contact Person	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 I  ■ \$125.00 Filing Fee □ \$130.00 Filing Certification	DEPARTMENT 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:

World Development G					
(Name of Foreign	Limited Liability Company; must include "Limit	ted Liabilit	ry Company," "L.L.C.," or "LLC."	')	
It name unavailable, enter alternate	name adopted for the purpose of transacting business in	Fiorida, The	alternate name must include "Limited	Liability Company," "L.L.C," or "LLC.	
New Jersey		_	83-3869693		
(Jurisdiction under the law of which foreign limited liability company is organized)		3.	(FEI number, it applicable)		
N/A					
J	(Day Carrier and The Carrier a				
	(Date first transacted business in Florida, if prior t (See sections 605,0904 & 605,0905, F.S. to determ	o registratio nune penalty	o.) cliability)		
523 Highland Terrace			523 Highland Terrace		
Street Address of Principal Office)		6.	(Mailing Address)	<del></del>	
Brick, New Jersey, 08	723		Brick, New Jersey, 08723		
71	<del></del>				
	<del></del>			<del></del>	
. Name and street address	ss of Florida registered agent: (P.O. Bo	x <u>NOT</u> :	acceptable)		
			-	<b>202</b> Sk	
Managa	Carl Ragosta			2021 AUG Straffe	
Name:			<del></del>	3	
Office Address:	740 Heron Drive			2 <sup>-1</sup> 279	
	Delray Beach		33444 , Florida	2: 2 5. FA	
	(Cuy)		(Zip code)	—— <sup>-1</sup> -12 30	

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 agents.

(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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Montana Ragosta Name: Name: \_\_\_\_\_ □Manager Manager Address: 523 Highland Terrace Address: □Member □Member Brick, New Jersey, 08723 □ Authorized □ Authorized Person Person □ Other\_\_\_\_\_ □Other\_\_\_\_ Other\_\_\_\_ □Other\_\_ Name: \_\_\_\_\_ ☐Manager □ Manager Name: \_\_\_\_\_\_ Address: \_\_\_\_\_\_ □Member ☐ Member Address: \_\_\_\_\_ □ Authorized ☐ Authorized Person Person □Other\_\_\_\_\_\_ Other \_\_\_\_\_ □Other\_\_\_ • Other Name: \_\_\_\_\_ □Manager Name: \_\_\_\_\_ □Manager Address: \_\_\_\_\_\_ □Member ☐ 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. 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

Montana Ragosta

# STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

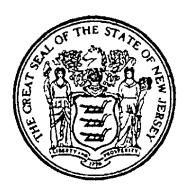
#### WORLD DEVELOPMENT GROUP NJ LLC 0450357555

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on March 07, 2019.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

ROSEANNE RAGOSTA 523 HIGHLAND TERRACE BRICK, NJ 08723



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 17th day of August, 2021

Elizabeth Maher Muoio State Treasurer

dans Mun

Certificate Number : 6122212571

Verity this certificate online at

https://www.f-state.nj/us/TYTR/StandingCert-JSP/Ferity/Cert.jsp