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ALLAHASSEE, FLO

2021 AUG 25 PM 3: 42

2821 AUG 25 AM 5: 5

AUG JUL

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 975718 4300123

AUTHORIZATION

COST LIMIT :7 \$ 125.00

ORDER DATE : August 25, 2021

ORDER TIME : 2:39 PM

ORDER NO. : 975718-005

CUSTOMER NO: 4300123

FOREIGN FILINGS

NAME: L&L FLORIDA ACQUISITIONS LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT# 61594

EXAMINER: _____

COVER LETTER

	L&L FLORII	DA ACQUISITIONS LLC					
JBJECT: _	T:Name of Limited Liability Company						
e enclosed " istence, and	Application by Foreign Limited Liability check are submitted to register the above	Company for Authorization to Transact Business in Florida." Cert referenced foreign limited liability company to transact business i					
ease return a	Il correspondence concerning this matter	to the following:					
	LYNN FENG						
		Name of Person					
	L&L HOLDING COMPANY						
		Firm/Company					
	142 WEST 57TH STREET						
	<u> </u>	Address					
	NEW YORK, NY 10019						
		City/State and Zip Code					
	lynn.feng@ll-holding.com						
		e used for future annual report notification)					
r further info	rmation concerning this matter, please ca	III:					
FANN	I FENG	646 679-1462					
	Name of Contact Person	Area Code Daytime Telephone Number					
Mailing Address: Registration Section		Street Address:					
Division of Corporations		Registration Section					
P.O. Box 6327		Division of Corporations The Centre of Tallahassee					
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810					
		Tallahassee, FL 32303					
Please	ed is a check for the following amount: make check payable to: FLORIDA DEP						
□ \$12	5.00 Filing Fee						

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	name adopted for the purpose of transacting business in Flo	orida. The alterna	ate name must include "Limited Li-	ability Company," "L L.C." or "LEC.")
Delaware 2.		87- 3.	-2232139	
(Jurisdiction under the law of)	which foreign limited liability company is organized)	J	(FEI numb	er, if applicable)
upon registration				
	(Date first transacted business in Florida, if prior to re (See sections 605,0904 & 605,0905, F.S. to determin	egistration.) e penalty liabilii	(y)	
c/o L&L Holding Co 5. (Street Address of Principal Office)	mpany 	san 6		
142 West 57th Stree			(Mailing Address)	
New York, NY 1001	9			202
7. Name and street addre	ss of Florida registered agent: (P.O. Box	NOT accep	itable)	NU5 25
Name:	Corporation Service Company		_	
Office Address:	1201 Hays Street		_	9: 51 - 13:50
	Tallahassee (City)		32301 Florida	
	(City)		(Zip code)	
Registered agent's accep	gistered agent and to accept service of pro-	ocess for th	te above stated limited li	ability company at the place this capacity. I further age

(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: Name: ____ □Manager □Manager Name: c/o L&L Holding Company ■Member □Member Address: 142 West 57th Street □ Authorized □ Authorized New York, NY 10019 Person Person □Other___ □Other____ □Other_ □Other___ □ Manager Name: □Manager Name: □Member Address: □Member Address: ☐ Authorized ☐ Authorized Person Person □Other □Other_____ □Other____ □Other Name: _____ □Manager □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. 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 David W. Levinson

Typed or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "L&L FLORIDA ACQUISITIONS 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 TWENTY-FIFTH DAY OF AUGUST, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "L&L FLORIDA"

ACQUISITIONS LLC" WAS FORMED ON THE SIXTEENTH DAY OF AUGUST, A.D.

2021.

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





Authentication: 204005755

Date: 08-25-21