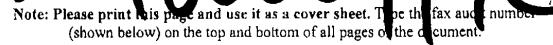
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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ALLEY, MAASS, ROGERS & LINDSAY, P.A.

Account Number : 072100000047 : (561)659-1770 Phone : (561)833-2261 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

BALLAS@AMRL.COM

Email Address:

Foreign Limited Liability Company Remember When Charters LLC

Certificate of Status	0
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Estimated Charge	\$155.00

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Corporate Filing Menu

Help



COVER LETTER

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TO:

BJECT:	Remember When Charters LLC			
bacci.	3	Name of Limited Liability Company		
		lity Company for Authorization to Transact Business in Florida," Certificate ove referenced foreign limited liability company to transact business in Flor		
ase returr	all correspondence concerning this mat	ter to the following:		
	David R. Maass, Esq.			
	Name of Person			
	Alley, Maass, Rogers & Lindsay,	P.A.		
		Firm/Company		
340 Royal Poinciana Way - Suite 321		321		
		Address		
	Palm Beach, Florida 33480			
	City/State and Zip Code			
	ballas@amrl com			
	E-mail address: (to be used for future annual report notification)		
r further i	information concerning this matter, pleas	ecall:		
Da	avid R. Maass	561 659-1770 at ()		
	Name of Contact Person	Area Code Daytime Telephone Number		
Re Di P.	edling Address: Ogistration Section Vision of Corporations O. Box 6327 Illahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Ple	closed is a check for the following amounts are make check payable to. FLORIDA \$125.00 Filing Fee \$130.00 Filing Certific	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:

me unavailable, enter alternate o	ame adopted for the purpose of transacting business in Flori	de. The alternate name must include "Limited Liebili	ty Company, " "L.L.C," or "Li
olawarc		87-2535049 3.	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(PEI number, i	(applicable)
pon qualification			
	(Date first transacted business in Florida, if prior to re (See acctions 605,0904 & 605,0901, P.S. to determine	pictration.) penalty liability)	
160 W. Camino Real s	2241	160 W. Camino Real #241	
n Address of Principal Office)	· · · · · · · · · · · · · · · · · · ·	6. (Mailing Address)	
Boca Raton, Florida 33	1432	Boca Raton, Florida 33432	
			
	_		
Name and <u>street addres</u> Name:	of Florida registered agent: (P.O. Box David R. Maass	<u>NOT</u> acceptable)	
		<u>NOT</u> acceptable)	
Name:	David R. Maass	33480	21 S
Name:	David R. Maass 340 Royal Poinciana Way - Suite 321		21 SEP

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized t manage [up to six (6) total]:

Title or Capacity:	Name and Address;	Title or Capacity:	Name and Address:
⊟ Manager	Name. Daniel S. Dagesse	■Manager	Name: Elaine G. Dagesse
≅ Member	Address: 160 W. Camino Real #241	≅Member	Address: 160 W. Camino Rcal #241
□Authorized	Boca Raton, Florida 33432	□Authorized	Boca Raton, Florida 33432
Person		Person	
□Other	Other	Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address: 340 Royal Poinciana Way	□Member	Address:
Authorized	Suite 321	Authorized	
Person	Palm Beach, Florida 33480	Person	
	Other	□Other	Other
□Manager	Name·	□Manager	Name:
□Member	Address:	☐ Member	Address:
□Authorized		☐ Authorized	
Person		Person	
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.

Dilou	
	Signature of an authorized person
David R. Maass	
	Torond or printed name of sinces

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "REMEMBER WHEN CHARTERS 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 EIGHTH DAY OF SEPTEMBER, A.D. 2021.

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

6213999 8300

SR# 20213187695

You may verify this certificate online at corp.delaware.gov/authver.shtml

Applicacy W. Bust as h. Become my of State

Authentication: 204104685

Date: 09-08-21