Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

Email Address:_

Foreign Limited Liability Company 8th and 22nd AG Development, LLC

Certificate of Status Certified Copy 1 Page Count Estimated Charge \$160.00

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1/1

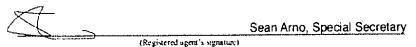
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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:

(Name of Foreign l	limited Liability Company; must include "Limit	ed Liability	Company," "L.L.C.," or "LLC.")		
f nume unavailable, enter alternate na	me adopted for the purpose of transacting business in Fk	onda. The al	ternate name must include "Limited Liability Co	empsay," "L.L.C." or "LLC.")	
Delaware		3.	N/A		
(funsdiction under the law of which foreign limited liability company is organized)		J.	(Firl number, stapplicable)		
Upon Qualification					
**************************************	(Due first transacted business in Florida, if prior to (See sections 605.0904 & 605.0908, F.S. to determ	o registration nine penalty) jubilisty)	-	
175 Fountainebleau Blvd. (Street Address of Principal Office)			175 Fountainebleau Blvd.		
		6.	(Mailing Address)		
Suite 2G1A			Suite 2G1A		
Miami, FL 33172			Miami, FL 33172	71 E2.	
Name and street addres	s of Florida registered agent: (P.O. Bo	x <u>NOT</u> :	ecceptable)	MI SEP 24	
Name:	Corporate Creations Network			[] -o	
Office Address:	801 US Highway I			H 4. 20	
	North Palm Beach		33408 , Florida	- -	
	(City)		(Zp code)		

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.



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: . Marlon Gomez Manager Manager Manager Name: 175 Fountainebleau Blvd. Member Address: Member Address: Suite 2G1A Authorized Authorized Miami, FL 33172 Person Person Other___ Other____ Other_ Other___ Name: _____ Manager | Manager Member Member Authorized Authorized Person Person Other_ Other____ Other_ 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. /s/ Marlon Gomez Signature of an authorized person

Typed or printed name of signee

Marlon Gomez

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "8TH AND 22ND AG DEVELOPMENT, LLC" IS

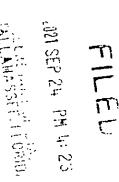
DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF SEPTEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "8TH AND 22ND AG DEVELOPMENT, LLC" WAS FORMED ON THE EIGHTH DAY OF JULY, A.D. 2021.

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





6069015 8300 SR# 20213331574 Authentication: 204238580

Date: 09-23-21