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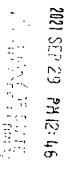
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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SEP 3 0 2021 M. SOLOMON

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	Calypso East 405, LLC	
0 1, 200 1		Name of Limited Liability Company
		liability Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florid
Please	return all correspondence concerning this	matter to the following:
	Christi Wilkett	
		Name of Person
	Calypso East 405, LLC	
	Firm/Company	
	108 Madison Ave	
		Address
		City/State and Zip Code
	Vacationrentals@gcwproperty.c	com
	E-mail addre	ss: (to be used for future annual report notification)
For furt	ther information concerning this matter, p	please call:
Christi Wilkett		740 941-6179
	Name of Contact Perso	
Mailing Address: Registration Section Division of Corporations		Street Address: Registration Section
		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 ar Please make check payable to: FLORII ☐ \$125.00 Filing Fee ☐ \$130.00 F	DA DEPARTMENT OF STATE

2021 SEP 29 PM 12: 46

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

IN COMPILANCE WHILESECTION (05/00), FLORIDES STATUTEN THE FOLLOWING IS SUBMITTED TO REGISTER A FORESCY. LEMITED LEBITITY COMPANY POTRANS/ICT BUSINESS IN THE STATE OF FLORIDE.

iane unavailable, enter alternate r	ame adopted for the purpose of transacting business in Flo	rida The	alternate name must include "Eimited Eability Company," "E. f. C, " or "I
Ohio		3	86-2375023
(Jurisdiction under the law of which foreign limited liability company is organized)			(FEI number, if applicable)
479/2021			
	(Date first transacted business in Florida, if prior to r (See sections 605 099) 3, 605 0905, FS, to determine	egistration	n j Irability)
108 Madison Ave	08 Madison Ave		108 Madison Ave
ect Address of Principal Office)			(Stading Address)
Piketon, OH 45661			Piketon, OH 45661
	_		
Same and <u>street addres</u>	s of Florida registered agent: (P.O. Box	<u> TON</u>	acceptable)
	CI S AND A		
	Christi Wilkett		
Name:			
·	15817 Front Beach Rd - Unit 405 East		
Name: Office Address:	15817 From Beach Rd - Unit 405 East		

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 mypolygion as registered agent.

(Registered agent a signature)

Typed or printed name of signee

Christi Wilkett

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

1. Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show CALYPSO EAST 405, LLC, an Ohio For Profit Limited Liability Company, Registration Number 4626907, was organized within the State of Ohio on March 2, 2021, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 8th day of September, A.D. 2021.

Ohio Secretary of State

Fred John

Validation Number: 202125102704



September 21, 2021

CHRISTI WILKETT CALYPSO EAST 405, LLC 108 MADISON AVE PIKETON, OH 45661

SUBJECT: CALYPSO EAST 405, LLC

Ref. Number: W21000127293

We have received your document for CALYPSO EAST 405, LLC and check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

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

Letter Number: 721A00022811

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Mel Solomon Senior Section Administrator

www.sunbiz.org