# M21000013071

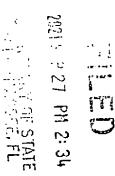
| (Requestor's Name)                      |  |  |  |  |
|---|--|--|--|--|
| (Address)                               |  |  |  |  |
| (Address)                               |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
| (Document Number)                       |  |  |  |  |
| Certified Copies Certificates of Status |  |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |  |
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Office Use Only



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# COVER LETTER

|                        | stration Section<br>tion of Corporations   |
|------------------------|--|
| SUBJECT:               | Brewing Entertainment Enterprise LLC   |
| 50110110117            | Name of Limited Liability Company  |
|                        | "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of check are submitted to register the above referenced foreign limited liability company to transact business in Florida.   |
| Please return a        | all correspondence concerning this matter to the following:  |
|                        | Cristian Martin  |
|                        | Name of Person   |
|                        | Brewing Entertainment Enterprise LLC   |
|                        | Firm/Company   |
|                        | 17338 SW 20th CT   |
|                        | Address  |
|                        | Miramar, FL 33029  |
|                        | City/State and Zip Code  |
|                        | crism@brewingentertainment.com /   |
|                        | E-mail address: (to be used for future annual report notification)   |
| For further inf        | formation concerning this matter, please call:   |
| Crist                  | ian Martin 347 221-8112 at ( )   |
|                        | Name of Contact Person at ()  Area Code Daytime Telephone Number   |
| Divis<br>Regis<br>P.O. | LING ADDRESS:  STREET ADDRESS:  Division of Corporations  Stration Section  Box 6327  Clifton Building  hassee, FL 32314  Character Circle  Tallahassee, FL 32301  |
|                        | check for the following amount:  |
|                        | \$125.00 Filing Fee \$\Bigcup \bigcup \b |

# 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:

| 1. Brewing Entertainment (Name of Foreign               | Limited Liability Company; must include "Limit  | ed Liability Company," "L.L.C.," or "LLC.")               |                                |
|---|---|---|--------------------------------|
|   |   |   |                                |
| lf name unavailable, enter alternate n                  | name adopted for the purpose of transacting business in Fl  | orida. The alternate name must include "Limited Liability | Company," "L.L.C," or "LL.C.") |
| New York  |   | 84-2962793  |                                |
| (furisdiction under the law of w                        | hich foreign limited liability company is organized)  | 3. (FEI number, i   | [applicable]                   |
|   |   |   |                                |
| l   | (Date first transacted business in Florida, if prior to<br>(See sections 605.0904 & 605.0905, F.S. to determ  | pregistration.) nine penalty liability)                   | _                              |
| 86-16 60th Ave  |   | 86-16 60th Ave  |                                |
| (Street Address of I                                    | Principal Office)   | 6. (Mailing Address)                                      |                                |
| Apt LC  |   | Apt LC  |                                |
| Elmhurst, NY 11373                                      |   | Elmhurst, NY 11373  | 202                            |
| . Name and street addres                                | ss of Florida registered agent: (P.O. Box   | x NOT acceptable)   | 24 2                           |
| Name:   | Cristian Martin   |   | T PH                           |
| Office Address:   | 17338 SW 20th Ct  |   | 2: 34<br>STATE<br>E, FL        |
|   | Miramar   | 33029   |                                |
|   | (City)  | , Florida<br>(Zip code)                                   | _                              |
| lesignated in this applica<br>o comply with the provisi | tance: gistered agent and to accept service of gistered agent and to accept service of gions, I hereby accept the appointment a gions of all statutes relative to the propers of my position as registered agent. | is registered agent and agree to act in t                 | his capacity. I further a      |
|   | Cristian Martin (Sep 25, 7021 12:53 EDT   | <del>.</del>  |                                |

(Registered agent a aignature)

| Title or Capacity:  | dress of the person(s) who has/have authority to manage is/are:  Name and Address:  |
|---|---|
| Manager   | Cristian Martin   |
|   | 17338 SW 20th Ct  |
|   | Miramar, FL 33029   |
|   |   |
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|   |   |
| (Use attachments if necessary)  |   |
| <ol> <li>Attached is a certificate of existence<br/>jurisdiction under the law of which it is<br/>of the translator must be submitted)</li> </ol> | e, no more than 90 days old, duly authenticated by the official having custody of records organized. (If the certificate is in a foreign language, a translation of the certificate u |
| 10. This document is executed in accord   | rdance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false informment of State constitutes a third degree felony as provided for in s.817.155, F.S.            |

Typed or printed name of signee

### STATE OF NEW YORK

### DEPARTMENT OF STATE

## Certificate of Status

I, ROSSANA ROSADO, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

**Entity Name:** 

BREWING ENTERTAINMENT ENTERPRISE LLC

DOS ID Number:

5616458

**Entity Type:** 

DOMESTIC LIMITED LIABILITY COMPANY

**Entity Status:** 

**EXISTING** 

Date of Initial Filing with DOS:

09/06/2019

Statement Status:

**CURRENT** 

Statement Due Date:

09/30/2021

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on September 23, 2021 at 11:30 A.M.

Brandon C Heylan

ROSSANA ROSADO, Secretary of State

By Brendan C. Hughes

**Executive Deputy Secretary of State** 

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