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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

: (307)200-2803

Fax Number : (855)330-1010

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

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Foreign Limited Liability Company 78th Street, LLC

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Help

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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 78th Street, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.E.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.E.C." or "U.C.") Washington (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.)
(See sections 605,0904 & 505,0905, F.S. to determine penalty hability) 1801 SE 3rd Ave 1801 SE 3rd Ave **STE 210** STF 210 Fort Lauderdale FL 33316 Fort Lauderdale FL 33316 7. Name and street address of Florida registered agent; (P.O. Box NOT acceptable) Northwest Registered Agent LLC Name: 7901 4th St N STE 300 Office Address: St. Petersburg 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.



Title or Capacity:	Name and Address:	Title or Capacity:		Name and	
☐ Manager	Name: Justin Sult 1801 SE 3rd Ave STE 2	Manager			
Member	Address: Hot SL Sto Ave 312 2	Member	Address:		
Authorized	Torchauderdale, FL 33310	Authorized			
Person		Person			
Other	Other	Other		Other	
☐Manager	Name:	Manager	Name:		
☐M e mber	Address:	Member	Address: _		
Authorized		Authorized			
Person		Person			
Other	Other	Other		Other	·
Manager	Name:	Manager	Name:		7621 011
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Authorized					
Person		D		-	<u>~</u>
Other	Other	O:her		Other_	
indexed individuals 9. Attached is a cert jurisdiction under th of the translator mus 10. This document i	se an attachment to report more than may be added to the index when filing ifficate of existence, no more than 90 ce law of which it is organized. (If the st be submitted) s executed in accordance with section ment to the Department of State consti	g your Florida Department of State days old, duly authenticated by the certificate is in a foreign language, 605.0203 (1) (b), Florida Statutes.	Annual Rep official havi a translation I am aware t	ort form. ng custody of revolutions of the certificate hat any false in	ecords in the ate under oath

Typed or printed name of signee

NAME RESOLUTION

I, Justin Sult, last member and authorized person of 78TH STREET, LLC, acting on behalf of the company, authorize Morgan Noble of Northwest Registered Agent, LLC. to file the name 78TH STREET, LLC, a Washington Limited Liability Company for use in the State of Florida.

Dated this 14th day of October , 2021

Justin Sult, Authorized Member

TOMOSTI .



Washington

Secretary of State

I, KIM WYMAN. Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

78TH STREET, LLC

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 08/28/2015.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that may proceedings for administrative dissolution are not pending.

> Issued Date: 10/13/2021 UBI Number: 603 537 312

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Kim Wyman, Secretary of State

tun Ulyna

Date Issued: 10/13/2021