M21000014015

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

(((H21000385037 3)))

H210003850373ABC$

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 : GERALD WEINBERG, P.C.
Account Number : I20030000043
Phone : (800)342-9856
Fax Number : (800)354-3381

2021 OCT 21 PM 2:15
FILED
SECRETARY OF STATE
TALLAHASSEE, FL

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

Email Address: _____

2021 OCT 21 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Foreign Limited Liability Company
ANTHURIUM LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	$155.00

Electronic Filing Menu Corporate Filing Menu Help

(H21000385037 3)

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. ANTHURIUM LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.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.L.C.," or "LLC.")

2. DELAWARE
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 87-1130618
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 790 E. BROWARD BOULEVARD
APARTMENT 313
FORT LAUDERDALE, FL 33301
(Street Address of Principal Office)

6. 790 E. BROWARD BOULEVARD
APARTMENT 313
FORT LAUDERDALE, FL 33301
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: INCORPORATING SERVICES, LTD., INC.

Office Address: 1540 GLENWAY DRIVE

TALLAHASSEE, Florida 32301
(City) (Zip code)

FILED
2021 OCT 21 PM 2:15
SECRETARY OF STATE
TALLAHASSEE, FL

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.

/s/ Melissa A. Moreau - Assistant Sec.
(Registered agent's signature)

(H21000385037 3)

(H21000385037 3)

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:
☐ Manager ☒ Member ☐ Authorized Person ☐ Other _____	Name: EMILY BERGER Address: C/O MARCUM LLP 730 THIRD AVENUE, 11TH FLOOR NEW YORK, NY 10017 ☐ Other _____	☐ Manager ☒ Member ☐ Authorized Person ☐ Other _____	Name: KRISTINA TORRES Address: 301 SW 1ST AVENUE APARTMENT 1726 FORT LAUDERDALE, FL 33301 ☐ Other _____
☐ Manager ☐ Member ☐ Authorized Person ☐ Other _____	Name: _____ Address: _____ ☐ Other _____	☐ Manager ☐ Member ☐ Authorized Person ☐ Other _____	Name: _____ Address: _____ ☐ Other _____
☐ Manager ☐ Member ☐ Authorized Person ☐ Other _____	Name: _____ Address: _____ ☐ Other _____	☐ Manager ☐ Member ☐ Authorized Person ☐ Other _____	Name: _____ Address: _____ ☐ 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.

Lawrence A. Kirsch
Signature of an authorized person

LAWRENCE A. KIRSCH
Typed or printed name of signer

(H21000385037 3)

(H21000385037 3)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ANTHURIUM 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 FOURTEENTH DAY OF OCTOBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ANTHURIUM LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF FEBRUARY, A.D. 2021.

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

Jeffrey W. Bullock, Secretary of State

5212943 8300
SR# 20213516057
You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 204415036
Date: 10-14-21