

MA1000014962

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

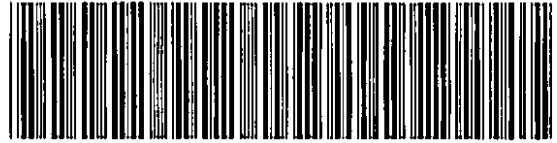
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
TOLSON, MISSOURI

T. LEMIEUX
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148397

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 931 Meridian Street LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Mark Antonelli
Name of Person

931 Meridian Street LLC
Firm/Company

4825 N Dixie Hwy Suite A
Address

Oakland park FL 33334
City/State and Zip Code

mark@gencodevelops.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mark Antonelli 954 868-9006
Name of Contact Person at () Area Code Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate
Certificate of Status Certified Copy of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 23, 2021

MARK ANTONELLI
4825 N DIXIE HWY STE A
OAKLAND PARK, FL 33334

SUBJECT: 931 MERIDIAN STREET LLC
Ref. Number: W21000140397

We have received your document for 931 MERIDIAN STREET LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 821A00025848

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. 931 Meridian Street LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

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

3. _____
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0901 & 605.0902, F.S. to determine penalty liability.)

5. 2457 E. Commercial Blvd
(Street Address of Principal Office)

6. 4825 N Dixie Hwy Suite
(Mailing Address)

Fort Lauderdale FL 33308

Oakland Park FL 33334

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

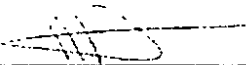
Name: Mark Antonelli

Office Address: 4825 N Dixie Hwy Suite A

Oakland Park, Florida 33334
(City) (Zip 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.


(Registered agent's signature)

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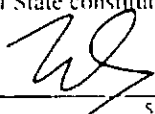
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: Zev Schechter	<input type="checkbox"/> Manager	Name: _____
<input checked="" type="checkbox"/> Member	Address: 1995 E Oakland Park Blvd	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	Fort Lauderdale Fl 33306	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: Mark Antonelli	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: 4825 N. Dixie Hwy	<input type="checkbox"/> Member	Address: _____
<input checked="" type="checkbox"/> Authorized	Suite A	<input type="checkbox"/> Authorized	_____
Person	Oakland Park FL 33334	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> 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.



Signature of an authorized person

Zev Schechter

Type or printed name of signer

State of Indiana
Office of the Secretary of State
Certified Copies

1. Verizon Fios Presents Come & See

This is a true and correct copy of the document as it appears in the original. The State of Indiana Office of the Secretary of State has verified the document as a true and correct copy of the original document as indicated.

This is a true and correct copy of the document as it appears in the original. The State of Indiana Office of the Secretary of State has verified the document as a true and correct copy of the original document as indicated.

Certified Date

November 02, 2021

Business Name

931 MERIDIAN STREET LLC

Business ID

201711011220032

Transaction
Business Entry Report

Date Filed

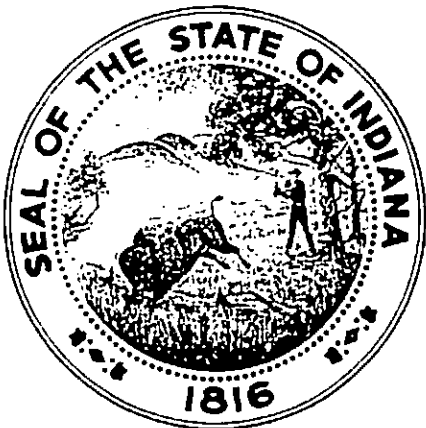
10/05/2021

No. of pages

2

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This is a true and correct copy of the document as it appears in the original. The State of Indiana Office of the Secretary of State has verified the document as a true and correct copy of the original document as indicated.

Holly Sullivan

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931 MERIDIAN STREET LLC 10/05/2021 14172911

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