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(((H21000431229 3)))



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Account Number : I20160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

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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 POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANYTUTRANSACT BUSINESS IN THE STATE OF FLORIDA:

name masserlapie, enter atmedate i	arms adopted for the purpose of arameeting business in F	orids. The alternate name must include "	Limited Liability Company," "L.L.	.C," or "LLC.")
Toxas	high (creage limited feelility company is organized)	3.,	(FEI number, if applicable):	<u>-</u>
Discontinuit maket one ton As as	and records arrived anything reality in the		, , , , , , , , , , , , , , ,	
	*(Date first represented business in Florida, If prior to (See sections 605,0904-9, 505,0905, F.S., to determ	registration.) ine penelty liability)		
2506 W. Main Street, S	Suite 500	7506 W Main Street	t, Suite 500	
et Address of Principal Office)		(Malling Address)		
Houston, TX 77098		Houston, TX 77098		
				-
·			`	2021 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
Name and street address	s of Florida registered agent: (P.O. Bo)	NOT acceptable)	ች Ξ Έ	SECRETARY SECRETARY
	Benjamin Szell		•	
Name:	13807 NW 4th Street	· _	; T	AMII: 46
Office Address:	1.7807 IAM Atu 200cct			
	Sunrise	333. Florida	 -	91
	(Cly)		Sto sode)	

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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3.	For initial indexing purposes,	list names, title or cap:	icity and addresses o	f the primary member	nalmanagera on beraom	s authorized to
m	mage [up to six (6) total]:					

Title or Canacity:	Name and Address:	Title or Capacity:	Name and Address:
□Manager	Name: Moderno Porcelain Works, LLC	□Manager	Name:
Member	Address: 2506 W. Main Street, Suite 500	☐Member	Address: 2506 W. Main Street, Suite 500
□Authorized	Houston, TX 77098	Authorized	Houston, TX 77098
Person		Person	
Other	□ Other	Other	□Other
	Name:	☐ Manager	Name:
□Member	Address:	□Membe:	Address:
□ Authorized		☐ Authorized	
Person		Person	
⊡ Other	** Other	Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□ Mæmb a r	Address:
[]Authorized		□ Authorized	
Person		Person	
OOther	Other	[]Other	
indexed individuals 9. Attached is a cert jurisdiction under th of the translator mus 10. This document	is executed in accordance with section 605.0202 ment to the Department of State conditions with	orida Department of State duly authenticated by the is in a foreign language (1) (b), Forida Statutes	official having oustody of records in the a translation of the certificate under oath. I am aware that any false information

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



John B. Scott Secretary of State

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Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Moderno Porcelain Tampa, LLC (file number 804313041), a Domestic Limited Liability Company (LLC), was filed in this office on November 09, 2021.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on November 22, 2021.



Prepared by: SOS-WEB

John B. Scott Secretary of State

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