## 1/2/0000/7486

(Requestor's Name)							
(Address)							
(Address)	<u></u>						
(City/State/Zip/Phone #)							
PICK-UP WAIT MA	IL						
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



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hel mhoste,

WELL-IVED

K. SALY DEC 2 7 2021

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 340347 7965870						
AUTHORIZATION : Japelle Bale						
COST LIMIT : \$.125.00						
ORDER DATE : December 20, 2021						
ORDER TIME : 5:15 PM						
ORDER NO. : 340347-025						
CUSTOMER NO: 7965870						
FOREIGN FILINGS						
NAME: MIDTOWN CENTRAL HOLDINGS LLC						
XXXX QUALIFICATION (TYPE: <u>LL</u> )						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING						

EXAMINER: \_\_\_

CONTACT PERSON: Eyliena Baker -- EXT#

## **COVER LETTER**

TO:

TO:		ration Section n of Corporatio	ns				
SUBJE	Mi :CT:	dtown Central i	Holdings LLC				
			Name o	of Limited Liability	Company		
						ansact Business in Florida," Certificate o y company to transact business in Florida	
Please 1	return all	correspondence	concerning this matter to the	he following:			
		Timothy Sand	ders				
		· · · · ·		Name of Person			
		13th Floor Inv	vestments				
				Firm/Company			
	2850 Tigertail Avenue, Suite 701						
				Address			
		Miami, FL 33	133				
			City	/State and Zip Code	:	· · · · · · · · · · · · · · · · · · ·	
		tsanders@13fi					
			E-mail address: (to be u	sed for future annua	l report no	tification)	
For furt	her infor	mation concernin	ig this matter, please call:				
	Elisa S	Seguin	786 at (	220-04	460		
		Name o	of Contact Person	Area Code	Day	rtime Telephone Number	
	Division Registra P.O. Bo	NG ADDRESS: n of Corporation: ation Section ox 6327 ssee, FL 32314			Division Registrat Clifton E 2661 Exc	of Corporations ion Section Building ecutive Center Circle see, FL 32301	
Enclose		eck for the follow .00 Filing Fee	ring amount; ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filis Certified Copy	_	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

, Midtown Central Hold	dings LLC		
(Name of Fore	eign Limited Liability Company; must includ	e "Limited Liability Company." "L.L.C.," or	"LI.C.")
Liability Company," "L.L.C."	Itemate name adopted for the purpose of tran	sacting business in Florida. The alternate narr	ne must include "Limited
<sub>2.</sub> Delaware	3.		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4			_
	(Date first transacted business in Flo (See sections 605,0904 & 605,0905, F.	orida, if prior to registration.) S. to determine penalty liability)	
5. 2850 Tigertail Avenu	ue, Suite 701		- 12
Miami, Florida 33133		MAI DEC 22 SECRETARISS	
	(Street Address of Principal	Office)	
6. 2850 Tigertail Avenue	e, Suite 701		- F. C
Miami, Florida 33133	3		
	(Mailing Address)		25.
7. Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)	2: 02 FLOW
Name:	Timothy Sanders		ી
Office Address:	2850 Tigertail Avenue, Suite 701		
	Miami	, Florida 33133	
	(City)	(Zip code)	•
designated in this applicate complywith the provision	gistered agent and to accept service of pation, I hereby accept the appointment as ons of all statutes relative to the proper my position as registered agent.	process for the above stated limited liabils registered agent and agree to act in this and complete performance of my duties,	s capacity. I further agree
8. The name title or cano	Registered age acity and address of the person(s) who ha	-	
Arnaud Karsenti, Manag	•	s/nave authority to manage is/are:	
2850 Tigertail Avenue,			
Miami, Florida 33133			
9. Attached is a certificate	of which it is organized. (If the certificate	duly authenticated by the official having of is in a foreign language, a translation of thorized person	
		(b), Florida Statutes. I am aware that any rd degree felony as provided for in s.817.	

Typed or printed name of signee

Arnaud Karsenti

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MIDTOWN CENTRAL HOLDINGS LLC" IS DULY

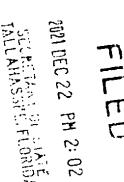
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF DECEMBER, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MIDTOWN CENTRAL HOLDINGS LLC" WAS FORMED ON THE TWENTIETH DAY OF DECEMBER, A.D. 2021.

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





Authentication: 205048903

Date: 12-21-21