

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.

((H22000036368 3)))



H220000363683ABC/

**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 : VOGEL LAW OFFICE, P.A.  
Account Number : I20030000100  
Phone : (239)262-2211  
Fax Number : (239)262-8330

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

Email Address: vogel@vogel-law.net

Foreign Limited Liability Company  
A & T INVESTMENT FL LLC

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$130.00

2022 JAN 27 PM 4:54

ALLAHADU

S. FRANKLIN  
JAN 28 2022

(((H22000036368 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. A & T INVESTMENT LLC

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

A & T INVESTMENT FL 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. Minnesota

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

3. 87-4242335

(FEI number, if applicable)

4. 1/1/2022

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

5. 25000 Tamiami Trail East

(Street Address of Principal Office)

6. 25000 Tamiami Trail East

(Mailing Address)

Naples, FL 34114

Naples, FL 34114

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

Name: Thomas T. Nguyen

Office Address: 25000 Tamiami Trail East

Naples

(City)

Florida 34114

(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.*

Thomas T. Nguyen  
(Registered agent's signature)

(((H22000036368 3)))

FILED  
2022 JAN 27 AM 4:30  
ALLSOUTH FL

(((H22000036368 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:**

☒ Manager Name: Thomas T. Nguyen

☐ Member Address: 25000 Tamiami Trail East

☐ Authorized Naples, FL 34114

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Title or Capacity:** **Name and Address:**

☒ Manager Name: Hong Phan

☐ Member Address: 25000 Tamiami Trail East

☐ Authorized Naples, FL 34114

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☒ Manager Name: Amina Gesalo

☐ Member Address: 25000 Tamiami Trail East

☐ Authorized Naples, FL 34114

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☒ Manager Name: Hislan Rashid Guled

☐ Member Address: 25000 Tamiami Trail East

☐ Authorized Naples, FL 34114

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ 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.

*Thomas T. Nguyen*  
Signature of an authorized person

Thomas T. Nguyen

Typed or printed name of signer

(((H22000036368 3)))

((H22000036368 3)))

## Office of the Minnesota Secretary of State Certificate of Organization

I, Steve Simon, Secretary of State of Minnesota, do certify that: The following business entity has duly complied with the relevant provisions of Minnesota Statutes listed below, and is formed or authorized to do business in Minnesota on and after this date with all the powers, rights and privileges, and subject to the limitations, duties and restrictions, set forth in that chapter.

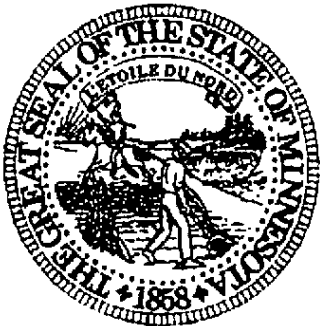
The business entity is now legally registered under the laws of Minnesota.

Name: A & T Investment LLC

File Number: 1270443000025

Minnesota Statutes, Chapter: 322C

This certificate has been issued on: 11/11/2021



*Steve Simon*

Steve Simon  
Secretary of State  
State of Minnesota

FILED  
JAN 27 2022  
TALLAHASSEE, FL

2022 JAN 27 AM 4:30