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.

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To:				
	Division of Corporations			
	Fax Number : (850)617-6383			
From:				
	Account Name : COGENCY GLOBA	L,INC.		
	Account Number : I20000000088			
	Phone : (800)221-0102 Fax Number : (800)944-6607		•	20
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Estimated Charge

## COVER LETTER

	Liberty Realty of Florida, LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Existence, an	"Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of deheck 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:
	Gerard Chiusolo
	Name of Person
	Liberty Realty of Florida, LLC
	Firm/Company
	609 SW Ocean Blvd
	Address
	Stuart FL, 34994
	City/State and Zip Code
	Jerry@libertyrealty.us
	E-mail address: (to be used for future annual report notification)
For further in	formation concerning this matter, please call:
	Gerard Chiusolo
_	Name of Contact Person Area Code Daytime Telephone Number
Div Reg P.O	STREET ADDRESS: STREET ADDRESS: Sion of Corporations Division of Corporations
Plea	osed is a check for the following amount: se make check payable to: FLORIDA DEPARTMENT OF STATE  \$125.00 Filing Fee  \$\sum_{\text{S130.00}} \text{S130.00 Filing Fee & }\sum_{\text{S155.00}} \text{S155.00 Filing Fee & }\sum_{\text{of Status & Certified Copy}} \text{S160.00 Filing Fee, Certified Copy}

To:

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

ame mavailable, enter alternate na	ime adopted for the purpose of transacting business in Flo	orida. The alterna	te name must includ	le "Limsted Liability (	Company," "L.L.C," or "L	LC.")
Delaware		3.	87-2565	87-2565791		
	nich foreign limited liability company is organized)			(FEI number, if applicable)		_
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration.) inc penalty liabili	ly)		_	
609 SW Ocean B	lvd	,	609 SW O	cean Blvd		
(Street Address of Principal Office)		6	<del></del>	(Mailing Address)		
Stuart FL, 34994				Stuart FL, 3	497E	
					FEB AH	_ <u> </u>
					ASE -	- [
Name and street addres	g of Florida registered agent: (P.O. Box	NOT acco	ptable)		PM 6:	
Name:	Gerard Chiusolo				23 RIDA	
Office Address:	609 SW Ocean Blvd	• • • • • • • • • • • • • • • • • • • •				
	Stuart		, Florida	34994		
	(City)		,,,,,,,,,,,	(Zip code)	_	

From: Kathrine Meer

To:

Ocean Blvd  4994  ther	Manager Member Authorized Person Other		
1994	Authorized Person	Address:	
	Person		
her	Other		
			Other
	Manager	Name:	
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Gerard Chiusolo Typed or printed name of signee Tp:



Page 1

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

DELAWARE, DO HEREBY CERTIFY "LIBERTY REALTY OF FLORIDA, 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 THIRD DAY OF FEBRUARY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LIBERTY REALTY
OF FLORIDA, LLC" WAS FORMED ON THE FIRST DAY OF SEPTEMBER, A.D.
2021.

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

Authentication: 202570475

Date: 02-03-22