

M22000003655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

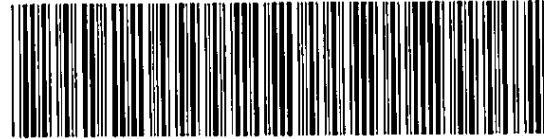
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** RARE COIN-IT HOLDINGS 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:

Scott Hochberg  
Name of Person

Rare Coin-It Holdings LLC  
Firm/Company

1930 Harrison Street, Suite 302  
Address

Hollywood, FL 33020  
City/State and Zip Code

OPERATIONS@RARECI.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Hochberg at 305 932-7713  
Name of Contact Person 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 & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy



**MELTZER LIPPE GOLDSTEIN & BREITSTONE, LLP**

2500 North Military Trail, Suite 314, Boca Raton, Florida 33431 • T. 561-989-1605  
[www.meltzerlippe.com](http://www.meltzerlippe.com)

*Patricia Gonzalez, Paralegal*  
*Direct: 561-989-1605 ext. 2224*  
*Fax: 561-989-1657*  
*Email: [pgonzalez@meltzerlippe.com](mailto:pgonzalez@meltzerlippe.com)*

March 10, 2022

**Via E-Mail: [kyle.brumblev@dos.myflorida.com](mailto:kyle.brumblev@dos.myflorida.com)**

Florida Division of Corporations  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

***Re: Rare Coin-It Holdings LLC – Foreign Registration***

Dear Kyle:

We are writing on behalf of Rare Coin-It Holdings LLC, a Delaware Limited Liability Company registering to transact business in Florida. As we discussed on the telephone this morning, our client, Rare Coin-It Holdings LLC erroneously formed a Florida LLC which was dissolved soon after. Our client then filed the foreign registration documents, a copy of the complete document package that was mailed to the Florida Division of Corporations is attached.

Subject to the foregoing information, please release the hold on the name of the entity as the intention was only to register the foreign LLC in Florida. The parties that filed the LLC and the foreign registration are one and the same.

If you should have any questions or require any additional information, please contact the undersigned.

Very truly yours,

Patricia Gonzalez, Paralegal

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AND  
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2022 FEB 17 PM 12:09  
STATE OF FLORIDA  
TALLAHASSEE, FL

Pag  
Attachment

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. RARE COIN-IT HOLDINGS LLC.  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," 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," "L.L.C.," or "LLC.")

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

3. 59-2700229  
(FEI number, if applicable)

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

5. 1930 HARRISON STREET, #302  
(Street Address of Principal Office)

6. 1930 HARRISON STREET, #302  
(Mailing Address)

HOLLYWOOD, FL 33020 HOLLYWOOD, FL 33020

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


Name: SCOTT HOCHBERG

Office Address: 1930 HARRISON STREET, #302

HOLLYWOOD, Florida 33020  
(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)

APPROVED  
AND  
FILED

2022 FEB 17 PM 12:09

SECRETARY OF STATE  
TALLAHASSEE, FL 32399

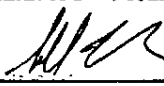
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

<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: SCOTT HOCHBERG	<input type="checkbox"/> Manager	Name: _____
<input checked="" type="checkbox"/> Member	Address: 1930 HARRISON STREET	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	SUITE #302	<input type="checkbox"/> Authorized	_____
Person	HOLLYWOOD, FL 33020	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 _____
 <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  
  
SCOTT HOCHBERG  
\_\_\_\_\_  
Typed or printed name of signee

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "RARE COIN-IT 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 TENTH DAY OF FEBRUARY, A.D. 2022.

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



6487719 8300

  
Jeffrey W. Bullock, Secretary of State

Authentication: 202629416