

W22000003934

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

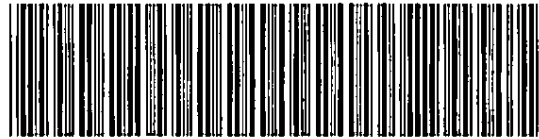
(Document Number)

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FILED
2022 MAR 14 PM 7:56
U.S. DISTRICT COURT
DISTRICT OF COLUMBIA

S. FRANKLIN

MAR 16 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Brendan Boyle L.L.C.
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:

Brendan Boyle

Name of Person

Brendan Boyle L.L.C.

Firm/Company

1801 N Flagler Dr. Unit 535

Address

West Palm Beach, FL 33407

City/State and Zip Code

brendanthboyle@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brendan Boyle

516

606-9667

at ()

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

2022 APR 14 PM 7:56
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**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. Brendan Boyle L.L.C.
(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. North Carolina 3. 84-2438626
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. Recently relocated to Florida, have not conducted business yet as of 1/11/2022.
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

| | |
|---|--|
| 5. <u>1801 N Flagler Dr</u> (Street Address of Principal Office) | 6. <u>1801 N Flagler Dr</u> (Mailing Address) |
| <u>Unit 535</u> | <u>Unit 535</u> |
| <u>West Palm Beach, FL 33407</u> | <u>West Palm Beach, FL 33407</u> |

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

Name: Brendan Boyle

Office Address: 1801 N Flagler Dr, Unit 535

West Palm Beach, Florida 33407
(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.

B Boyle
(Registered agent's signature)

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JUDICIAL CIRCUIT IN AND FOR
PALM BEACH COUNTY, FLORIDA

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 checked="" type="checkbox"/> Manager | Name: <u>Brendan Boyle</u> | <input type="checkbox"/> Manager | Name: _____ |
| <input type="checkbox"/> Member | Address: <u>1801 N Flagler Dr</u> | <input type="checkbox"/> Member | Address: _____ |
| <input type="checkbox"/> Authorized | <u>Unit 535</u> | <input type="checkbox"/> Authorized | _____ |
| Person | <u>West Palm Beach, FL 33407</u> | 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.

B Boyle

Signature of an authorized person

Brendan Boyle

Typed or printed name of signee



NORTH CAROLINA

Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

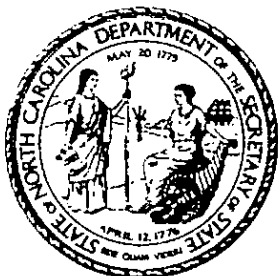
I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

BRENDAN BOYLE L.L.C.

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 15th day of July, 2019

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger, or articles of conversion for said limited liability company.

2022 JAN 14 PM 7:56
ELAINE F. MARSHALL



Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 14th day of January, 2022.

Elaine F. Marshall

Secretary of State

Brendan Boyle, Manager
Brendan Boyle LLC
1801 N Flagler Dr.
West Palm Beach, FL 33407
(516) 606-9667
brendantboyle@gmail.com

3/8/2022

Dear Sharon D. Franklin:

I am writing to inform you that Brendan Boyle LLC a Florida entity was filed in error. I have since dissolved the entity and have no intention of revoking the dissolution. I am giving Brendan Boyle LLC, a North Carolina entity permission to use the name.

Sincerely,

Brendan Boyle, Manager
Brendan Boyle LLC

2022 MAR 14 PM 7:56
FILED
CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
PALM BEACH COUNTY, FLORIDA
CLERK'S OFFICE
1000 WEST PALM BEACH BLVD
WEST PALM BEACH, FL 33411



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 1, 2022

BRENDAN BOYLE
1801 N FLAGLER DR UNIT 535
WEST PALM BCH, FL 33407 US

We have received your document for BRENDAN BOYLE L.L.C. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as or not distinguishable from the name of a voluntarily dissolved business entity. This name is not available for the assumption or use by another entity for 120 days after the effective date of the dissolution. The dissolved business entity may provide the Department of State with an affidavit or letter, releasing the name for use to you and affirming they have no intention of revoking the dissolution or you may adopt an alternate name for use in Florida. If you choose to adopt an alternate name, please enter that name in the space provided in number one of the application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin
Regulatory Specialist II

Letter Number: 422A00005042

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MAR 14 2022