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(Re	questor's Name)			
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PICK-UP	☐ WAIT	MAIL.		
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Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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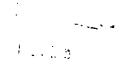


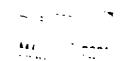
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CORPORATE ACCESS, _

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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March 23, 2022

CORPORATE ACCESS

SUBJECT: 3455 NW 37 STREET, LLC

Ref. Number: W22000037855

We have received your document for 3455 NW 37 STREET, LLC and check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please accept our apology for failing to mention this in our previous letter.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

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

Suzanne Hawkes Regulatory II

PECEIVED
PRIZAMAR 24 PM 12: 21

Corrected 2/18/122

Letter Number: 622A00006845

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

IN COMPLIANCE WITH SECTION 603:0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate i	name adopted for the purpose of transacting business in Florida	The site one name	e must include "Limited f.	iability Company," "	LLC." or "	'ር "ነ
DELAWARE		87-2453 3.				
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	J. <u>-</u>	(FEI num	ber, if applicable)	-	-
	(Date first transacted business in Florida, if prior to regis (See sections 605 0904 & 605 0905; F.S. to determine pr	tration) enalty liability)				
1010 Lee Rd						
reet Address of Principal Office)		6(Mait	ing Address)			-
Rochester NY 14606						
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Name and street addres	ss of Florida registered agent: (P.O. Box N	<u>OT</u> acceptable	:)	:	8	:
				r	PM	;
Name:	REGISTERED AGENT SOLUTIONS, IN	NC.		(*). ***********************************		•
Name.				<u>ر :</u>	1: 02	
Office Address:	155 Office Plaza Dr. Suite A					
	Tallahassee		32301			
	(Cuy)	,, I	lorida(Zup code)			
egistered agent's accep	,		(Zip code)			

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:	Title or Capacity:	Name and Address:
□Manager	Name: Giovanni Lidestri	□Manager	Name: Matias Otero
X Member	Address: 20165 NE 39th Place TS-1	⊠Member	Address: 245 Michigan Avenue
□ Authorized	Aventura, FL 33180	□Authorized	Apartment LG2
Person		Person	Miami Beach, FL 33139
Other	Other	□Other	□Other
□Manager	Noe David Argueta	□Manager	Name:
™Member	Address: 5401 SW 104th Ct	□Member	Address: 222
□Authorized	Miami, FL 33165	□Authorized	A A
Person		Person	8
Other	Other	Other	ہے ا
			:02
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	Other	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.

Signature of an authorized person

GIOVANNI LIDESTRI

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "3455 NW 37 STREET, 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-SECOND DAY OF MARCH, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "3455 NW 37 STREET, LLC" WAS FORMED ON THE FIFTH DAY OF AUGUST, A.D. 2021.

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

2022 MAR 18 PM 1: 02

Jeffrey W. Bulbach, Secretary of State

Authentication: 202969423

Date: 03-22-22

6147676 8300

SR# 20221096539

You may verify this certificate online at corp.delaware.gov/authver.shtml