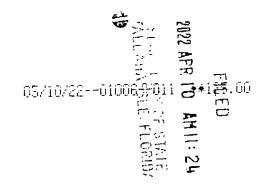
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	name adopted for the purpose of transacting business in Fl	orida. The alternate name must include "Limited	d Liability Company," "L.L.C. ' or "LL		
Defaware		1			
Jurisdiction under the law of which foreign limited liability company is organized)		(FEI m	(FEI number, if applicable)		
	(Date first transacted business in Florida, if prior to (See sections 605,090) & 605,0905, F.S. to determ	registration [ine penalty liability]			
1554 N Beverly Drive		6. (Mailing Address)			
eet Address of Principal Office)		(Mading Address)			
Beverly Hills CA 90210		Beverly Hills CA 90210			
					
			22		
Nome and arrear address	ss of Florida registered agent: (P.O. Box	NOT accampable)	22 AF		
Name and street address	ss of Florida registered agent. (F.O. Box	1801 acceptable)	7 7 T		
	Telos Legal Corp.		ASSEE.		
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Name:			How H		
	155 Office Plaza Drive		(11+ 2 (3 %) (1.08)		
Name: Office Address:			APR 10 AMII: 25 APR 10 AMII: 25 APR 10 AMII: 25		
	Tallahassee		닭 5		

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: Robert Pardo	□Manager	Name:	
□Member	Address: 1554 N Beverly Drive	□Member	Address:	
□Authorized	Beverly Hills, CA 90210	☐Authorized		
Person		Person:		
Other	Other	□Other	<u>_</u>	□Other
□Manager	Name:	□Manager	Name:	
☐Member	Address:	□Member	Address:	
□Authorized		Authorized		
Person		Person		
Other	Other	□Other		Other
□Munager	Name:	Manager	Name:	
□Member	Address:	□Member	Address:	
□ Authoriz ed		□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.

Robert Pardio

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 "VAF 2931 NEW LIFE WAY 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 NINTH DAY OF MAY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "VAF 2931 NEW LIFE WAY LLC" WAS FORMED ON THE THIRD DAY OF MAY, A.D. 2022.

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

Authentication: 203376908

Date: 05-09-22