M92000008384

	(Requestor's Name)	
. (Address)		
(Address)		
	(City/State/Zip/Phone #)	
PICK-UF	WAIT MAIL	
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		

Office Use Only



200388550012

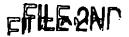
2022 MAY 26 AH 10: 5

APPROVED FILED

2022 HAY 26 PH 3:

RECEIVED

K. Brumbley



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195			
REFERENCE : 710404 7136655			
AUTHORIZATION: Linebole man			
COST LIMIT : (\$ 125.00			
ORDER DATE: May 26, 2022			
ORDER TIME : 2:13 PM			
ORDER NO. : 710404-020			
CUSTOMER NO: 7136655			
FOREIGN FILINGS			
NAME: HARE KRISHNA LANTANA HOTEL,, LLC			
XXXX QUALIFICATION (TYPE: <u>LL</u>)			
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:			
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING			
CONTACT PERSON: Alexxis Weiland EXT#			
EXAMINER:			

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	Hare Krishna Lantana Hotel, LLC			
Sommer.	Name of Limited Liability Company			
		mpany for Authorization to Transact Business in Florida." Certificate of erenced foreign limited liability company to transact business in Florida.		
Please return	n all correspondence concerning this matter to the	ne following:		
	Anna I. Dolan			
Name of Person				
	Greenberg Traurig			
Firm/Company				
	1717 Arch Street, Suite 400			
	Address			
	Philadelphia, PA 19103			
City/State and Zip Code				
	dolana@gtlaw.com			
	E-mail address: (to be us	sed for future annual report notification)		
For further i	nformation concerning this matter, please call:			
An	na I. Dolan	215 988-7873		
	Name of Contact Person	at () Area Code Daytime Telephone Number		
Ma	illing Address:	Street Address:		
Registration Section		Registration Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		
Та	llahassee, FL 32314	2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303		
Ple	elosed is a check for the following amount: ase make check payable to: FLORIDA DEPAI \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of \$	□ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate		

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

IN COMPLIANCE WITH SECTION 605 0202, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Hare Krishna Lantana Hotel, LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC") off name univariable, enter alternate name adapted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (Date that transacted business in Florida, if prior to registration.) (See sections 605 (904 & 605 (905, F.S. to determine penalty liability) 2030 Avalon Parkway, Suite 200 (Street Address of Principal Office) McDonough, GA 30253 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Vijay Patel Name: 6903 Congress Street Office Address: New Point Richey, FL 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. Vijay Patel

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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name: Hare Krishna FL 2 Holding ŁLC Name: □Manager □Manager Address: 2030 Avalon Pkwy, Ste. 200 ■Member □Member Address: McDonough, GA 30253 □ Authorized ☐ Authorized Person Person □Other _____ Other____ □Other_____ □Other_____ □Manager □Manager Name: ☐ Member Address: □Member Address: ____ ☐ Authorized ☐ Authorized Person Person □Other____ □Other □Other____ □Other_____ Name: □Manager □Manager Name: Address: □Member □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. Nonindexed 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. ana J. Dolan Signature of an authorized person Anna I. Dolan

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 "HARE KRISHNA LANTANA HOTEL, 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-SIXTH DAY OF MAY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HARE KRISHNA LANTANA HOTEL, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF MAY, A.D. 2022.

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

Authentication: 203531091

Date: 05-26-22