## 7200000 86

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

Office Use Only



100381746021

RECEIVED



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	06/02/2022		
	Greg Pintacuda		
Reference	#: <b>1703969</b>		
	me:ERIC	A DHAWAN, LLC	
<ul> <li>✓ Articles of Incorporation/Authorization to Transact Business</li> <li>☐ Amendment</li> <li>☐ Change of Agent</li> <li>☐ Reinstatement</li> <li>☐ Conversion</li> </ul>			
<ul><li>☐ Merger</li><li>☐ Dissolution/Withdrawal</li><li>☐ Fictitious Name</li><li>☐ Other</li></ul>			
	d Amount: \$125		

## COVER LETTER

то:	Registration Section Division of Corporations			
CHRI	Erica Dhawan, LLC			
2004		e of Limited Liability Co	ompany .	
	nclosed "Application by Foreign Limited Liability race, and check are submitted to register the above			
Please	return all correspondence concerning this matter t	o the following:		
	Rory O'Neill			
		Name of Person		
	Pillsbury Winthrop Shaw Pittman LLP  Firm/Company  11710 El Camino Real, Suite 150  Address			
San Diego, CA 92130				
	coo@cotentialgroup.com, erica@co	tentialgroup.com  e used for future annual i	raport notification)	
E 6.	·		report infiliation)	
ror iu	rther information concerning this matter, please ca			
	Rory O'Neill	858 at (	509-4026	
	Name of Contact Person	Area Code	Daytime Telephone Number	
Mailing Address:		Street Address:		
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registration Se		
		Division of Co	•	
		The Centre of		
		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DEF  \$125.00 Filing Fee \$\sum \text{S130.00 Filing Fe}\$  Certificate of	e & 📱 \$155.00 Filir	ng Fee & 🔲 \$160.00 Filing Fee, Certificate	

## 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 TAMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Erica Dhawan, LLC	Limited Liability Company; must include "Limited	Liability Compar	ıv " "L. L.C. " or "L.L.C.")		_	
Think the transfer	Tanner (and they company, that a produce the control of	in a company	y, manage of 1915.			
(B'mame unavailable, enter alternate)	name adopted for the purpose of transacting business in Flo	rida. The alternate n	ame must include "I mitted Loabili	lity Company," "L.1,C," or	<del>-</del> TIC5	
Delaware			113047			
2 (furisdiction under the law of which foreign limited hability company is organized)		3. (FEI mimber, if applicable)				
4		<del></del>		_		
	(Date first transacted business in Florida, if prior to re (See sections 605 0904 & 605 0905, F.S. to determin	e penalty liability)				
855 Central Ave 5		855 C	entral Ave			
(Street Address of Principal Office)		6. (Mading Address)		_		
Suite 609		Suite 609				
St. Petersburg, FL 33701		St. Petersburg, FL 33701		. ,~2	_	
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptal	ole)	772 2	guaren 1 () eprizen	
Name:	Cogency Global Inc.				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Office Address:	115 N Calhoun Street, Suite 4			PH 3: 36	, <b>-</b>	
	Tallahassee		32301 , Florida	<u> </u>		

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.

Cogency Global Inc.

manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
□Manager	Name: Erica Gupta	□Manager	Name:
■Member	Address:	■Member	Address: 855 Central Ave
□Authorized	Suite 609	□Authorized	Suite 609
Person	St. Petersburg, FL 33701	Person	St. Petersburg, FL 33701
□Other		□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	Other	□Other	□ Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
□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.

5-Ca 10	<del></del>
$\gamma$	Signature of an authorized person
Erica Gupta	
	Typed or printed name of signer

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ERICA DHAWAN, 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 SECOND DAY OF JUNE, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ERICA DHAWAN, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF SEPTEMBER, A.D. 2012.

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



Jeffrey W Bullock, Secretary of State