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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	120000000	195
	REFERENCE	:	764553	7136655
	AUTHORIZATION	:	Louble	exam
	COST LIMIT	:	\$ (130.00	
ORDER DATE :	June 22, 2022			
ORDER TIME :	9:14 AM			
ORDER NO. :	764553-005			
CUSTOMER NO:	7136655			
	FOREIGN F	'ILI	NGS	
NAME:	BHAVANI JACKS	ОИV	TILLE LLC	
XXXX QUALIFI	CATION (TYPE: <u>L</u>	<u>L</u> .)		

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER:

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

COVER LETTER

Registration Section

TO:

CT:	Name of Limited Liability Company						
		Company for Authorization to Transact Business in Florida," Certific referenced foreign limited liability company to transact business in F					
return	all correspondence concerning this matter t	o the following:					
	Anna I. Dolan						
		Name of Person					
	Greenberg Traurig						
		Firm/Company					
	1717 Arch Street, Suite 400						
		Address					
	Philadelphia, PA 19103						
	C	ity/State and Zip Code					
	dolana@gtlaw.com						
	E-mail address: (to be	used for future annual report notification)					
her in	formation concerning this matter, please cal	N:					
Ann	a I. Dolan	215 988-7873 at ()					
	Name of Contact Person	at () Area Code Daytime Telephone Number					
	ling Address: istration Section	Street Address: Registration Section					
Division of Corporations		Division of Corporations					
	. Box 6327	The Centre of Tallahassee					
Tall	ahassec. FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Enck	osed is a check for the following amount:						

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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

f name unavailable, enter alternate na	ame adopted for the purpose of transacting busin	ness in Florida. The alter	mate name must include "Limited Liab	ility Company," "L L.C," or	"LLC.")
Delaware					
(Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI numb				if applicable)	_
	(Date first transacted business in Florida, if (See sections 605 0904 & 605 0905, F.S. to	prior to registration) o determine penalty liab	ility)		
2030 Avalon Parkway	y, Suite 200	,			
reet Address of Principal Office)		6	(Mailing Address)	<u> </u>	_
McDonough, GA 3025	53				
				,	_
		_			_
Name and street address	s of Florida registered agent: (P.C	D. Box NOT acc	entable)	022 J	* * ITA
· ·					# ij
Name:	Vijay Patel			70	
evalue.	6000 Congress Street			P1	
Office Address:	6909 Congress Street		_	<u>-</u> , ' - -	· •3-
	New Port Richey		34654 Florida	J. J	
	Tion Continuing				

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: Hare Krishna FL 12 Holding LLC Name: □Manager □ Manager 2030 Avalon Pkwy, Ste. 200 ■ Member □Member Address: McDonough, GA 30253 □ Authorized □ Authorized Person Person □Other_ □Other_ Other___ □Other___ □Manager Name: _____ □ Manager Name: _____ □Member Address: ____ ☐Member Address: ______ ☐ Authorized ☐ Authorized Person Person □Other □Other____ □Other___ □Other____ □Manager Name: Name: _____ ____ □ Manager □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. 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 \$.817.155, F.S. ana J. Dolan Signature of an authorized person

Typed or printed name of signee

Anna I. Dolan

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BHAVANI JACKSONVILLE 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 JUNE, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BHAVANI

JACKSONVILLE LLC" WAS FORMED ON THE THIRTIETH DAY OF MARCH, A.D.

2022.

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

Authentication: 203735991

Date: 06-22-22