

M22000012924

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2022 AUG -8 PM 1:04
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AUG 18 2022

M. SOLOMON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STAR PHONES LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MARTIN LOPEZ

Name of Person

THE COMPANY MAKER LLC

Firm/Company

1635 SW 19TH TERRACE UNIT B

Address

MIAMI, FL, 33145

City/State and Zip Code

martin@thecompanymaker.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Martin Lopez

786

757-1227

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: FLORIDA DEPARTMENT OF STATE

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

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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 LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. STAR PHONES LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. DELAWARE
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 84-3066056
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 2315 NW 107 AVENUE
(Street Address of Principal Office)

6. 1044 N 5TH STREET
(Mailing Address)

SUITE 1B12/B13 MAIL BOX 34
MIAMI, FL 33172

NEW HYDE PARK, NY 11040

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: THE COMPANY MAKER LLC

Office Address: 1635 SW 19TH TERRACE UNIT B

MIAMI, Florida 33145
(City) (Zip code)

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.

ANDREA TIORENO
(Registered agent's signature)

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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:

☒ Manager Name: MANDEEP SINGH

☐ Member Address: 2315 NW 107 AVE

☐ Authorized SUITE 1B12/B13 MAIL BOX 34

MIAMI, FL 33172

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: Name and Address:

☒ Manager Name: JASVINDER SINGH

☐ Member Address: 1044 N 5TH STREET

☐ Authorized NEW HYDE PARK, NY 11040

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

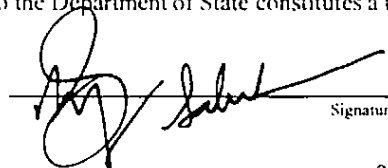
Person _____

☐ 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

Mandeep Singh

Typed or printed name of signee

July 28, 2022

Att: New Filings

Florida Division of Corporations

2415 N Monroe, Ste 810,

Tallahase, FL, 32303

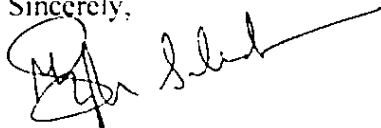
Re: **Name surrender Star Phones LLC/ L19000196071**

I, Mandeep Singh, acting as the President of the Florida Limited Liability Company ("LLC") Star Phones LLC, Document Number L19000196071, with address at 2315 NW 107 Ave Mail Box 34 Ste 1B12/B13, Miami, FL 33172, liquidated on July 28, 2022, enclosed for your reference as ***Attachment 1***, duly surrender my right to reserve the name of my entity for one (01) year counted since the day of the liquidation, in favor of another entity which I represent and which I am converting from the State of Delaware to a Florida LLC. I am respectfully submitting the Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for Star Phone Solutions LLC, along with a certificate of Good Standing issued by the State of Delaware and its applicable fee enclosed for your reference as ***Attachment 2***.

In light of the aforementioned, I respectfully requests to the Florida Division of Corporations:

- (1) ***Accept and process*** the Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for Star Phones LLC, enclosed in the Attachment 2:

Sincerely,



Mandeep Singh

1635 SW 19th Terrace, Unit B,

Miami, FL, 33145

Delaware


The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "STAR PHONES 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.



7600973 8300



Jeffrey W. Bullock, Secretary of State

Authentication: 203717295



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 22, 2022

MARTIN LOPEZ
THE COMPANY MAKER LLC
1635 SW 19TH TERRACE UNIT B
MIAMI, FL 33145

SUBJECT: STAR PHONES LLC
Ref. Number: W22000096125

We have received your document for STAR PHONES LLC and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

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

Mel Solomon
Senior Section Administrator

Letter Number: 122A00016456