## M2200014379

(Re	equestor's Name)	
(Ad	ldress)	
(Ād	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	e)
(Dc	ocument Number)	
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S. FRANKLIN SFP 1 5 2022

## COVER LETTER

SUBJECT:	SPEED ROAD SERVICE Imports 6	*POST LLC	
		e of Limited Liability Company	_
he enclose xistence, a	rd "Application by Foreign Limited Liability and check are submitted to register the above	Company for Authorization to Transact Business in Florida, referenced foreign limited liability company to transact business.	," Certificate iness in Flori
lease retur	n all correspondence concerning this matter to	o the following:	
	MARTTI KALKAS		
		Name of Person	-
	KALKAS BUSINESS SERVICES		
		Firm/Company	<u>-</u>
	6801 HARDING AVE APT 417		_1
		Address	. [5].
	MIAMI BEACH, FL 33141		. 3
	C	ity/State and Zip Code	- '-
	MJKALKAS@BELLSOUTH.NET		1 Pil 4: 10
	E-mail address: (to be	used for future annual report notification)	· -
or <b>fur</b> ther i	nformation concerning this matter, please cal	l:	0
Ma	ARTTI KALKAS	305 577-9716	
	Name of Contact Person	Area Code Daytime Telephone Number	•
	iling Address:	Street Address:	
	gistration Section	Registration Section	
	vision of Corporations	Division of Corporations	
	D. Box 6327	The Centre of Tallahassee	
Ta	Hahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
	closed is a check for the following amount:		
	ase make check payable to: FLORIDA DEP. \$125.00 Filing Fee	: & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee,	

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

	Limited Liability Company, must include "Limited	d Liability	Company," "L.L.C.," or "L.L.C.")	<del></del>
	CE IMPORT & EXPORT LLC.			
ame unavailable, enter alternate	name adopted for the purpose of transacting business in Fl	orida. The al	ternate name must include "Limited Liability Com	pany," "L.L.C," or
DELAWARE		7	APPLIED FOR	
(Jurisdiction under the law of which foreign limited liability company is organized)		٥	(FEI number, if applica	ible)
09/02/2022				
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration )	h.i.e.	
245 SE 1ST STREET			AME AS PRINCIPAL OFFICE	~
et Address of Principal Office)	<del></del>	6	(Mailing Address)	<u> </u>
			(maning Audited)	<i>(</i> )
MIAMI, FL 33131				1
		_		<del>;</del>
				Fil
		_		-
ame and <u>street addre</u>	ss of Florida registered agent: (P.O. Box	NOT ac	ceptable)	5
Name:	MARTTI KALKAS			
		-		
Name.	545 CU ICT CUDUUT CTU 111			
Office Address:	245 SE 1ST STREET, STE 234			
	245 SE 1ST STREET, STE 234  MIAMI (City)		 33131 , Florida	

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: Name: \_\_\_ MARCELO GERALDO MAIA ■Manager Name: \_\_\_\_\_ □Manager Address: 245 SE 1ST STREET, STE 229 □Member □Member Address: \_\_\_\_\_ MIAMI, FL 33131 **[]** Authorized □ Authorized Person Person ⊞Other ..... □Other\_\_\_\_\_ □Other\_\_\_\_\_ □Other\_\_\_\_ □Manager Name: \_\_\_\_\_ □Manager Name: \_\_\_\_\_ □Member Address: \_\_\_\_ ☐ Member Address: \_\_\_\_ □ Authorized □ Authorized Person Person □ Other Other\_\_\_\_\_ □Other\_\_\_\_ □Other -Name: \_\_\_\_\_ □Manager □Manager Name: □Member Address: □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. Signature of an authorized person

Typed or printed name of signee

MARTTI KALKAS

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "SPEED ROAD SERVICE IMPORT & EXPORT

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 THIRTIETH DAY OF AUGUST, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SPEED ROAD SERVICE IMPORT & EXPORT LLC" WAS FORMED ON THE SIXTEENTH DAY OF AUGUST, A.D. 2022.

7072 See - 7 PH LE 10

6971428 8300 SR# 20223397812 Authentication: 204279814

Date: 08-30-22