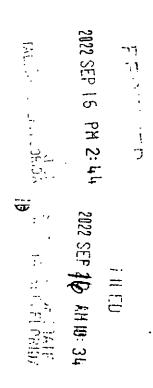
# MD20000/4607

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

Office Use Only



800394655728



T. LEMIEUX SEP 2 1 2022

## COVER LETTER

	ation Section a of Corporatio	ns		٩
SUBJECT:		ESPada And Name of Li	Cash 10 H	_C :
The enclosed "Ap Existence, and ch	pplication by Foreck are submitted	reign Limited Liability Compa ed to register the above referen	ny for Authorization to Transz ced foreign limited liability co	act Business in Florida," Certificate of empany to transact business in Florida.
Please return all o	correspondence	concerning this matter to the fo	ollowing:	
		Den 1.	SSe Espad	<u>a.</u>
			1 Costilo LL	-C ·
		200 Grand	Aulnue	
		K-ree?ort City/Suat	94 11590 ·	
_		NO. REYES O E-mail address: (to be used To	Hotmall (	COM -
For further inform	ation concerning	this matter, please call:		
	) eniss Name of	e Espara . s		1360 · Telephone Number
Division ( Registrati P.O. Box	G ADDRESS: of Corporations ion Section 6327 ee, FL 32314		STREET AD Division of Co Registration S Clifton Buildi 2661 Executiv Tallabassee, F	orporations lection ng ve Center Circle
Enclosed is a check		<u> </u>		
<b>LJ \$</b> 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

# Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

# incserv°

### ORDER FORM

TO Florida Department of State

The Centre of Tallahassee

2415 North Monroe Street, Suite 810

Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

**FROM** 

Melissa Moreau

mmoreau@incserv.com

850.656.7953

REQUEST DATE 9/16/2022

**PRIORITY** Regular Approval

OUR REF # (Order ID#) 1072580

ORDER ENTITY

ESPADA AND CASTILLO LLC

## PLEASE PERFORM THE FOLLOWING SERVICES: ESPADA AND CASTILLO LLC\_(FL)

File the attached foreign qualification document

NOTES:

\$125.00 Authorized

Email address for annual report reminders: smcfarland@sundocfilings.com

#### RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Friday, September 16, 2022 Page 1 of 1



September 19, 2022

INCORP SERVICES

SUBJECT: ESPADA AND CASTILLO LLC

Ref. Number: W22000118942

Please honor the original submission date as the fire date thanks?

We have received your document for ESPADA AND CASTILLO LLC. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please provide a signature for the registered agent and authorized person.

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

STANTON H ROBERTS Regulatory Specialist II

Letter Number: 522A00020805

2022 SEP 20 PH 2:

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FO COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	OLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY .
1. ESPOA AN CONTROL (Name of Foreign Tamited Liability Company; must include "Limited	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 Floris	ds. The alternate name must include "Limited Limitify Company," "L.L.C," or "LLC,")
2. NEW 40/R (Jurisdiction mader the law of which foreign limited liability company is organized)	3. 88-39 (3267. (FEI number, if applicable)
4. (Date first transacted business in Florida, if prior to re (See sections 605 0904 & 605 0905, F.S. to determine	@Minehon.)
5. 20 Grand Avenue Freezort	6. 220 Grand Avenue, Freefort
20 Grand Avenue	200 Grand Aveng
FreePort Ny 11520.	FreePort, NY 11520.
7. Name and street address of Florida registered agent: (P.O. Box 1	NOT acceptable)
Name: Denisse Estad	<u>.</u>
Office Address: 8119 Fan Palm	1
hissimmee	, Florida 34747 · (Zip code)
Registered agent's acceptance: Having been named as registered agent and to accept service of prodesignated in this application, I hereby accept the appointment as reto comply with the provisions of all statutes relative to the proper an and accept the obligations of my position as registered agent.	egistered agent and agree to act in this capacity. I further agree nd complete performance of my duties, and I am familiar with
Denisse Greata  Gregorie sign	2022 SEP
	FILED  NESSER PO AM 19: 31  NESSER PO AM 19: 31  NESSER PO AM 19: 31

8. The name, title or capacity and address of Title or Capacity:	of the person(s) who has/have authority to manage is/are:  Name and Address:
Manager	Denisse Estada
	Denisse Estada 220 Grand Avenue
	FreePort NY 11520.
<del></del>	
	· · · · · · · · · · · · · · · · · · ·
(Use attachments if necessary)	
9. Attached is a certificate of existence, no mojurisdiction under the law of which it is organiof the translator must be submitted)	ore than 90 days old, duly authenticated by the official having custody of records in the ized. (If the certificate is in a foreign language, a translation of the certificate under oath
10. This document is executed in accordance submitted in a document to the Department of	with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information State constitutes a third degree felony as provided for in s.817.155, F.S.
	Denisse Espala Signature of an authorized person
·	Denisse Espada  Typed or printed name of sinner

#### STATE OF NEW YORK

#### DEPARTMENT OF STATE

#### Certificate of Status

I. ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: ESPADA AND CASTILLO LLC

**DOS 1D Number:** 6572718

Entity Type: DOMESTIC LIMITED LIABILITY COMPANY

Entity Status: EXISTING

Date of Initial Filing with DOS: 08/26/2022

Statement Status: CURRENT Statement Due Date: 08/31/2024

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on September 15, 2022 at 01:19 P.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C Hugher

By Brendan C. Hughes Executive Deputy Secretary of State

Authentication Number: 100002191699 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at <a href="http://ecorp.dos.ny.gov">http://ecorp.dos.ny.gov</a>