Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000329292 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

: (307)200-2803

Fax Number

: (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

-				
E 7	וובר	กกก	ress	•
		Auu	1633	

## **Foreign Limited Liability Company** Indialantic Beach Condo, LLC

Certificate of Status	0	
Certified Copy	0	
Page Count	04	
Estimated Charge	\$125.00	

S. FRANKLIN Help SEP 23 2022

Electronic Filing Menu

Corporate Filing Menu

## 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: Indialantic Beach Condo, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.U.C.," or "LLC.") rll name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate manie minst include "Limited Liability Company," "L.L.C." or "LLC.") Durisdiction under the law of which foreign limited liability company is organized) Date first transacted business in Florida, if prior to registration | (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 6. 1754 E Cedar Trails Way 5 1754 E Cedar Trails Way (Street Address of Principal Office) Eagle Mountain UT 84005 Eagle Mountain UT 84005 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agents Inc. Name: 7901 4th St N STE 300 Office Address: St. Petersburg

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.

(Registered agent's signature)

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]: Name and Address: Title or Capacity: Title or Capacity: Name and Address: Name: Tiffany Walden □Manager **X**Manager Address: □ Member Address: ☐ Member 1754 E Cedar Trails Way □ Authorized □ Authorized Eagle Mountain UT 84005 Person Person □Other\_\_ □Other \_\_\_\_\_ □Other\_\_\_\_ □Other\_\_\_\_ □ Manager Name: \_\_\_\_\_ □Manager □ Member Address: □Member □ Authorized □ Authorized Person Person Other\_\_\_\_\_ □Other\_\_\_\_\_ □Other\_\_\_\_\_ □()ther\_\_\_\_\_ Name: Name: □ Manager □ Manager Address: Address: □Member □Member □ 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 Riley Park

Esped or printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "INDIALANTIC BEACH CONDO, LLC" IS DULY

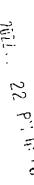
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF SEPTEMBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "INDIALANTIC BEACH CONDO, LLC" WAS FORMED ON THE SECOND DAY OF JULY, A.D. 2021.

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





Authentication: 204459078

Date: 09-22-22

6054940 8300 SR# 20223595658