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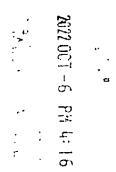
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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S. ROBERTS OCT 0 6 2022

COVER LETTER

TO:

Registration Section

Div	ision of Corporations					
SUBJECT:	15051 THINK BIGGIE, LLC.					
orbate i.	}	Name of Limited Liability Company				
		ility Company for Authorization to Transact Business in Florida," Certificate of love referenced foreign limited liability company to transact business in Florida.				
Please return	all correspondence concerning this mat	iter to the following:				
	Julian Mejia-Gomez					
		Name of Person				
	Estefan Enterprises, Inc.					
		Firm/Company				
	420 Jefferson Avenue					
Address						
	Miami Beach, Florida 33139					
		City/State and Zip Code				
	jmejiagomez@estefan.com					
	E-mail address: (to be used for future annual report notification)				
For further in	nformation concerning this matter, pleas	e call:				
Juli	ian Mejia-Gomez	305 695-7013 at ()				
	Name of Contact Person	Area Code Daytime Telephone Number				
Reg Div P.C	iling Address: gistration Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Plea	closed is a check for the following amoust ase make check payable to: FLORIDA \$125.00 Filing Fee \$130.00 Filing Certific	DEPARTMENT OF STATE				

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 FOREKON LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	taine adopted for the purpose of transacting business in Flo	1 99	L	- 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>
f name unavailable, enter alternate i	name adopted for the purpose of fransacting business in Flo	orida i he a	dernate name must include "Li	mited Ciability Company, "1.1.	C. OF LLC.
Deleware		3	87-3974420		
(Jurisdiction under the law of w	hich foreign limited liability company is organized)		(F	El number, if applicable)	
December 17, 2021					
	(Date first transacted business in Florida, if prior to i (See sections 605 0904 & 605,0905, F.S. to determi	egistration. ne penalty l) inbility)	 	
420 Jefferson Avenue			420 Jefferson Avenue		
reet Address of Principal Office)			(Mailing Address)		
Miami Beach, Florida			Miami Beach, Florida		
33139		_	33139		
. Name and <u>street addres</u>	ss of Florida registered agent: (P.O. Box	<u>NOT</u> a	cceptable)	- 41 ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° ° °	2022 OCT
Name:	Corporate Creations Network Inc.			٠.	Hd 9
Office Address:	801 US Highway 1				<u></u>
	North Palm Beach		33408 , Florida	3	9
	(City)			code)	

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.

Tin Saville Erin Saville, Special Secretary
(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]:

Title or Capacity:	Name and Address:	Title or Capacity	<u>Name and Address:</u>
■Manager	Name:	■Manager	Name:
□Member	Address: 420 Jefferson Avenue	□Member	Address: 420 Jefferson Avenue
□Authorized	Miami Beach, FL 33139	□Authorized	Miami Beach, FL 33139
Person		Person	
□Other	Other	□Other	☐ Other
□Manager	Name:	□Manager	Name:
■Member	Address: 420 Jefferson Avenue	□Member	Address:
□Authorized	Miami Beach, FL 33139	□Authorized	
Person		Person	
Other	Other	□Other	□Other_
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	Other	□Other	Other

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

Emilio Estegan, Jo-

Page 1



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

DELAWARE, DO HEREBY CERTIFY "15051 THINK BIGGIE, 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-FIRST DAY OF SEPTEMBER, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "15051 THINK BIGGIE, LLC" WAS FORMED ON THE NINTH DAY OF DECEMBER, A.D. 2021.

at corp.delaware.gov/au

Authentication: 204446484

Date: 09-21-22