## M2300002350

| (Re                                     | equestor's Name)      | <u> </u> |  |  |  |
|---|-----------------------|----------|--|--|--|
| (Ad                                     | ldress)               |          |  |  |  |
| (Ad                                     | idress)               |          |  |  |  |
| (Ci                                     | ty/State/Zip/Phone #) |          |  |  |  |
| PICK-UP                                 | WAIT                  | MAIL     |  |  |  |
| (Bu                                     | usiness Entity Name)  |          |  |  |  |
| (Document Number)                       |                       |          |  |  |  |
| Certified Copies                        | Certificates of       | Status   |  |  |  |
| Special Instructions to Filing Officer: |                       |          |  |  |  |
|   |                       |          |  |  |  |
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Office Use Only



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## Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

| DATE <u>2/22/23</u>                   | <del></del>                 | **WALK IN**   |
|---------------------------------------|-----------------------------|---|
| ENTITY NAME_                          | EL CAR WASH FLAGLER         | LLC   |
| DOCUMENT NU                           | MBER                        |   |
|                                       | **PLEASE FILE TA            | HE ATTACHED AND RETURN**  |
|                                       | Plain Copy                  |   |
| XXXX                                  | Certified Copy              |   |
|                                       | Certificate of Status       |   |
|                                       | **PLEASE OBTAIN THE I       | FOLLOWING FOR THE ABOVE ENTITY**  |
|                                       | Certified Copy of Arts      | & Amendments  |
|                                       | Certified Copy of Arts      | & Amendments Complete File (Including Annual Reports)                       |
|                                       | Certificate of States       |   |
| · · · · · · · · · · · · · · · · · · · | Certificate of Status Ri    | effecting:  |
|                                       | **APOSTILLE' / I            | NOTARIAL CERTIFICATION**  |
| COUNTRY OF DE                         | STINATION                   |   |
| NUMBER OF CER                         | TIFICATES REQUESTED         |   |
| TOTAL OWED \$                         |                             | ACCOUNT # 120140000108  United Corporate Services, Inc.  Thank you so much! |
| Please call Tin                       | a at the above number for a | ony issues or concerns. Thank you so much!                                  |

## 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:

| name unavailable, enter alternate n  | ame adopted for the purpose of transacting business in Fl  | orida. The alternate n                 | ame must include "Limited Liability | y Company," "L.L.C," or "I | īc. |
|--------------------------------------|--|--|-------------------------------------|----------------------------|-----|
| Delaware                             | hich foreign limited liability company is organized)   | 3                                      | (FEI mamber,                        |                            | _   |
| (Jurisdiction under the law of w     | hich foreign limited liability company is organized)   |  | (FE) mimber,                        | ti applicable)             |     |
|                                      | (Date first transacted business in Florida, if prior to<br>(See sections 605 0904 & 605 0905, F.S. to determ | registration ) sine penalty liability) |                                     | _ <del>_</del>             |     |
| 5201 SW 8th Street                   |  | 5201                                   | SW 8th Street                       |                            |     |
| (Street Address of Principal Office) |  | o                                      | (Masling Address)                   | )                          | _   |
| Coral Gables, FL 3313                | 4  | Coral                                  | Gables, FL 33134                    |                            |     |
|                                      |  |  | <u></u>                             | 2023                       | _   |
| Name and street addres               | ss of Florida registered agent: (P.O. Bo   | x <u>NOT</u> accepta                   | ible)                               | FEB 22                     |     |
| Name:                                | United Corporate Services, Inc.  |  |                                     |                            |     |
| Office Address:                      | 3458 Lakeshore Drive   |  |                                     | H 7: 23                    |     |
|                                      | Tallahassee  |  | 32312<br>, Florida                  |                            |     |
|                                      | (City)   |  | (Zip code)                          | <del></del>                |     |

Registered agent's acceptance:

1 . . .

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.

Michael A. Barr
(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: Geoffrey Karas Name: Justin Landau ■ Manager Manager Address: \_\_\_ 5201 SW 8th Street Address: Member Member Coral Gables, FL 33134 Coral Gables, FL 33134 ☐ Authorized Authorized Person Person Other .... Other Other\_ Other Name: \_\_\_\_\_\_ Manager Manager Name: \_\_\_\_\_\_ Manager Member | Address: Member Address: Authorized Authorized Person Person \_\_Other\_\_\_\_\_ Other\_ Other\_\_\_\_ Other\_ Name: \_\_\_\_ 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 condititutes a third defree felony as provided for in s.817.155, F.S.

**Justin** 

Typed or printed name of signed

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "EL CAR WASH FLAGLER, 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 FEBRUARY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EL CAR WASH FLAGLER, LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF FEBRUARY, A.D. 2023.

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

Authentication: 202764256

Date: 02-22-23

7308470 8300 SR# 20230637823