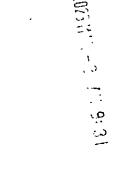
M23000002643

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

Office Use Only



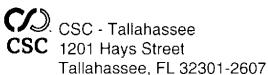
900399920879





S. ROBERTS

MAR - 3 2023



850-558-1500, Ext: 61594

To: Department Of State, Division Of Corporations

From: Eyliena Baker

Ext: 61594 Date: 03/02/23 Order #: 539577-3 Re: 86 Sf Merritt, LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$125.00 - FL State Account Number: muldenan

120000000195

AUTHORIZATION:

Please take the following action: File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO:

Registration Section

	Nam	ne of Limited Liability Company
		Company for Authorization to Transact Business in Florida," Certificat referenced foreign limited liability company to transact business in Florida.
ise return	all correspondence concerning this matter t	to the following:
	Colin Murphy	
		Name of Person
		Firm/Company
	121 South West 6th Terrace	
		Address
	Boca Raton, FL 33486	
	C	City/State and Zip Code
	E-mail address: (to be	e used for future annual report notification)
further in	formation concerning this matter, please ca	II:
		at ()
	Name of Contact Person	Area Code Daytime Telephone Number
	ling Address: eistration Section	Street Address: Registration Section
	rision of Corporations	Division of Corporations
	0. Box 6327 lahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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:

Delaware	name adopted for the purpose of transacting business in Flo	orda. The alternate hame ands include. Limited Liability	Company, 1.1.C, or
	which foreign limited liability company is organized)	3. (FEI number, if a	
Jurisdiction under the law of v	which foreign limited liability company is organized)	(FEI number, if a	applicable)
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determine	registration) ne penalty hability)	_
121 South West 6th To	errace	6. (Mailing Address)	
et Address of Principal Office)	······	(Mailing Address)	
Boca Raton, FL 33486		Tallahassee, FL 32301	202
			- -:
			2.5
Name and street addre			
	m or roll box	<u>,</u>	بن
Name:	Corporation Service Company		<u>u</u>
	Corporation Service Company 1201 Hays Street		<u></u>
Name: Office Address:		32301 , Florida(Zip code)	<u></u>

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: Colin Murphy □Manager □Manager Name: Address: 121 South West 6th Terrace Address: □ Member □Member Boca Raton, FL 33486 ■ Authorized □ Authorized Person Person ☐Other Other □Other □Other____ Name: _____ □Manager Name: □Manager □Member Address: Address: □Member □ Authorized ☐ Authorized Person Person □Other □Other_____ □Other____ □Other_____ □Manager ☐ Manager □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. Colin Murphy
Colin Murphy (Feb .4, 2073 18.27 EST)

Signature of an authorized person

Colin Murphy



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

DELAWARE, DO HEREBY CERTIFY "86 SF MERRITT, 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 FIRST DAY OF MARCH, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "86 SF MERRITT,

LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF FEBRUARY, A.D. 2023.

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



Authentication: 202816649

Date: 03-01-23