M23000003641

(Red	questor's Name)	
(Add	ress)	
	iress)	<u>.</u>
Mac	11033)	
(City	//State/Zip/Phone	÷ #)
PICK-UP	MAIT	MAIL
(Bus	siness Entity Nan	ne)
(2)	micoo Emily man	
(Doc	cument Number)	
Certified Copies	Certificates	of Status
	Tie off	
Special Instructions to F	·Iling Officer:	

Office Use Only



200404174692

93/21/23--01029--009 **125.00

FILED
2023 HAR 21 AH II: 26

RECEIVED 2023 MAR 21 PM 2:46

K. Brumbiey

COF	RPC)RA	ΓE
A	CC	TCC	

When you need ACCESS to the world

ACCESS,

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

CERTIFIED COP PHOTOCOPY CUS	PICK UP:	CAT 3/21			
РНОТОСОРУ	Y			<u> </u>	
CUS			_		
			_		
FILING	FOI	REIGN LLC			
		LC			
CORATE NAME AND	DOCOMENT#)				
RPORATE NAME AND	DOCUMENT #)		-		
RPORATE NAME AND	DOCUMENT #)			, -	
RPORATE NAME AND	DOCUMENT #)	- ·			
RPORATE NAME AND	DOCUMENT #)				
DODATE NAME AND	DOCUMENT #\				
	RPORATE NAME AND RPORATE NAME AND RPORATE NAME AND	ADVISORY PARTNERS LEAD PORATE NAME AND DOCUMENT #) RPORATE NAME AND DOCUMENT #) RPORATE NAME AND DOCUMENT #) RPORATE NAME AND DOCUMENT #)	RPORATE NAME AND DOCUMENT #) RPORATE NAME AND DOCUMENT #) RPORATE NAME AND DOCUMENT #)	PORATE NAME AND DOCUMENT #) RPORATE NAME AND DOCUMENT #) RPORATE NAME AND DOCUMENT #) RPORATE NAME AND DOCUMENT #)	PORATE NAME AND DOCUMENT #) RPORATE NAME AND DOCUMENT #) RPORATE NAME AND DOCUMENT #) RPORATE NAME AND DOCUMENT #)

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

IN COMPILANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTOTRANSACTBUSINESS IN THE STATE OF FLORIDA:

iaine unavailable, enier alternate i	name adopted for the purpose of transacting business in Flori	da. The alternate name must include "Limited Liability	Company," "L.L.C." or "L.L.C.")
DELAWARE		3	
(Jurisdiction under the law of w	rhich foreign limited liability company is organized)	3. (FEI number, it a	applicable)
	(Date first transacted business in Florida, if prior to reg (See sections 605 0904 & 605,0905, F.S. to determine	istration) penalty liability)	_
1634 Fernando Drive		1634 Fernando Drive	
eet Address of Principal Office)		6, (Mailing Address)	
Tallahassee, Florida 32	2303	Tallahassee, Florida 32303	
•			•
			2002
Name and street addre	ss of Florida registered agent: (P.O. Box)	NOT acceptable)	2023 HAR
			2 2
	Nada Usina		
Name:			
Office Address:	1634 Fernando Drive		7
VIII00 11201025.	Tallahassee	32303	6
	Tattattassee	. Florida	
	(City)	(Zip code)	

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: Name and Address: Title or Capacity: Nada Usina Nante: Name: □ Manager □Manager 1634 Fernando Drive Address: **■**Member ☐ Member Address: ______ Tallahassee, Florida 32303 □ Authorized ☐ Authorized Person Person □Other_____ □Other___ Other Other Name: ☐ Manager Name: _____ □ Manager ☐ Member Address: ☐Member Address: ☐ Authorized □ Authorized Person Person □Other____ □Other___ Other____ Other__ Name: _____ Name: □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. Niena Voina Signature of an authorized person Nada Usina

Typed or printed name of signee

Delaware

The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "NU ADVISORY PARTNERS 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 MARCH, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NU ADVISORY PARTNERS LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF MARCH, A.D. 2023.

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

Jeffrey W. Duffech, Secretary of State

Authentication: 202963996

7361987 8300