## M23000

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

Office Use Only



000404500740

2023 NAR 28 PM 6: 29

MAR 2 8 2023 K. Brumbley Tallahassee, FL 32301-2607 850-558-1500, Ext: 61594

To: Department Of State, Division Of Corporations

From: Eyliena Baker

Ext:

Date: 03/28/23 Order #: 617959-1

Re: 2724 Nw 2nd Avenue Holding, 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:

Banis Kenan

12000000195

**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.

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTEN, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate na	me adopted for the purpose of transacting business is	n Florida. The	alternate name must include "Limited I.	nability Company," "L.L.C," or "LL	
Delaware		,			
(Jurisdiction under the law of which foreign limited liability company is organized)		3. (FEI number, if applicable)			
	(Date first transacted business in Florida, if prior (See sections 605,0904 & 605,0905, F.S. to detu	r to registration	n.) : hability)	- 102.4.00P	
10851 N. Black Canv				Highway, Suite 125	
10851 N. Black Canyon Highway, Suite 125		6.	10851 N. Black Canyon Highway, Suite 125 (Mailing Address)		
reet Address of Principal Office)			(,viaining /Address)		
Phoenix, AZ 85029			Phoenix, AZ 85029		
Name and street address	of Florida registered agent: (P.O. B	ov NOT	accentable)	<b>N</b>	
	of Florida registered agent: (P.O. B	ox <u>NQT</u>	acceptable)	2023 HAR 2	
Name:		ox <u>NOT</u>	acceptable)	2023 MAR 28 P	
	Corporation Service Company	ox <u>NOT</u>	acceptable)  32301 . Florida	13.0	
Name:	Corporation Service Company 1201 Hays Street	ox <u>NOT</u>	32301	PH 6: 2	

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:
■Manager	Name: National Safe Harbor Exchanges, Inc.	□Manager	Name:	
■Member	Address: Phoenix, AZ 85029	e 125 □Member	Address:	
□Authorized		□Authorized		
Person		Person		
□Other	Other	□Other	<del></del>	□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person	<del></del>	Person		
□Other	Other	□Other	<del></del>	□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
□Other	Other	□Other		□Other

<u>Important Notice</u>: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed 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

James G. Beck/Vice President/Exchange Counsel

Page 1



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

DELAWARE, DO HEREBY CERTIFY "2724 NW 2ND AVENUE HOLDING, 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-EIGHTH DAY OF MARCH, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "2724 NW 2ND AVENUE HOLDING, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF MARCH, A.D. 2023.

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

A STATE OF THE PARTY OF THE PAR

Authentication: 203020509

Date: 03-28-23