Ma3000004319

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



NA



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03/13/22--01037--019 **125.00



US 3



March 9, 2023

Privileged & Confidential Via United Parcel Service

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32317

RE: Application by Foreign LLC to Transact Business in Florida – Offshore Asset Fishing Team, LLC

To whom it may concern:

Enclosed please find the following for Offshore Asset Fishing Team, LLC:

- 1. Application by Foreign LLC to Transact Business in Florida Offshore Asset Fishing Team, LLC;
- 2. Certificate of Good Standing from Delaware; and
- 3. Check for \$125.00 to cover filing fee.

Please return the filed document using the enclosed pre-addressed envelope. If you should have any questions, please contact our office at your earliest convenience, 312-263-8600.

Best regards.

DUGGAN BERTSCH, LLC

Sarah J. Berry

SJB/slf Encl.

COVER LETTER

JECT: Nar		
	ne of Limited Liability Company	
	Company for Authorization to Transact Business in Florida," referenced foreign limited liability company to transact busin	
e return all correspondence concerning this matter	to the following.	
Sarah Berry		
······································	Name of Person	
DUGGAN BERTSCH, LLC	7.	
	Firm/Company C 3	
303 W Madison St, STE 1000		
	Address Co	
Chicago, IL 60606	Pit Pit	
-	City/State and Zip Code	
dlittwin@dugganbertsch.com	25	
E-mail address: (to b	be used for future annual report notification)	
in ther information concerning this matter, please e	all:	
Sarah Berry	312 263-8600	
Name of Contact Person	at () Area Code Daytime Telephone Number	
Mailing Address:	Street Address:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amount:		

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

IN COMPLIANCE WITH SECTION (0)5 (002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN, LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. Offshore Asset Fishing Team, LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.") off name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L. L. C." of "L.L.C." of Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605 0904 & 505 0908, F.S. to determine penalty hability) 9128 NW Highway 225A 9128 NW Highway 225A (Street Address of Principal Office) (Mading Address) Ocala, FL 34482 Ocala, FL 34482 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) DUGGAN BERTSCH, LLC Name: 875 109th Avenue N. Suite 302 Office Address: Naples Registered agent's acceptance: 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.

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:

Brigid Kennedy

Decrease States of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacit	<u>v:</u> <u>Name and Address:</u>
■Manager	Name: Brigid Kennedy	□Manager	Name:
□Member	Address: 9128 NW Highway 225A	□Member	Address:
□Authorized	Ocala, FL 34482	□Authorized	
Person		Person	
□Other	□Other	□Other	Other
□Manager	Name.	□Manager	Name:
□Member	Address	□Member	Address
□Authorized		□Authorized	
Person		Person	
⊡Other	Other	□Other	
□Manager	Name	□Manager	Name 3
•		_	Name: 100 4
□Member	Address:	□Member	Address
□Authorized		□Authorized	<u> </u>
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. 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 1 am aware that any talse 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

Brigid Kennedy

Typed of printed name of signee



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

DELAWARE, DO HEREBY CERTIFY "OFFSHORE ASSET FISHING TEAM, LLC" IS

DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

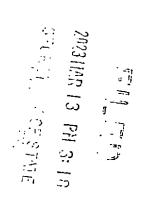
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE NINTH DAY OF MARCH, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OFFSHORE ASSET FISHING TEAM, LLC" WAS FORMED ON THE TWENTIETH DAY OF FEBRUARY,

A.D. 2023.

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





Authentication: 202875208

Date: 03-09-23

7306340 8300 SR# 20230924892