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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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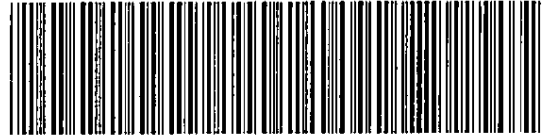
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 MAY 17 AM 9:25

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RHODES & WARNER, P.C.

ATTORNEYS AT LAW

1301 THIRTEENTH STREET

COLUMBUS, GEORGIA 31901

CARL A. RHODES
JAMES R. WARNER

POST OFFICE BOX 2454
COLUMBUS, GEORGIA 31902

TELEPHONE (706) 598-8008
TELECOPIER (706) 598-8216

May 16, 2023

Florida Department of State
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, Florida 32303
VIA FED EX OVERNIGHT

Re: Application by Florida Limited Liability Company for Authorization to
Transaction Business in Florida: Beaco Properties, LLC

Gentlemen:

Enclosed please find the following:

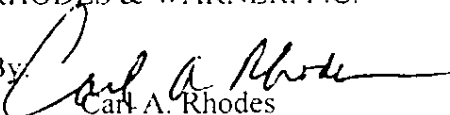
- 1) **original** check numbered 32915 payable to Florida Department of State in the amount of \$160.00 (representing the filing fee of \$100, designation of registered agent of \$25.00, certified copy cost of \$30.00 and Certificate of Status of \$5.00);
- 2) **duplicate originals** of the Cover Letter;
- 3) **duplicate originals** of the Application by Florida Limited Liability Company for Authorization to Transaction Business in Florida as accepted by the designated Registered Agent; and
- 4) **duplicate originals** of the Certificate of Existence issued by the Georgia Secretary of State on May 16, 2023.

I have enclosed a self-addressed, postage prepaid mailer for your convenience in mailing to us the Certificate of Authorization of Beaco Properties LLC to transact business in Florida.

Thank you for your assistance.

Very Truly Yours,
RHODES & WARNER, P.C.

By:


Carl A. Rhodes

Encls.
Letter\B980001-fl sos.500

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Beaco Properties, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Kaizad P. Shroff
Name of Person

Beaco Properties, LLC
Firm/Company

P.O. Box 701
Address

Columbus, Georgia 31902-0701
City/State and Zip Code

dockkaiz@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kaizad P. Shroff at (646) 462-4033
Name of Contact Person Area Code Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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:

1. Beaco Properties, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If 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.," or "LLC.")

2. Georgia
(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____
(FEI number, if applicable)

4. Upon Qualification in Florida
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 17135 Front Beach Road, Unit 8
(Street Address of Principal Office)

6. P.O. Box 701
(Mailing Address)

Panama City Beach, Florida 32413

Columbus, Georgia 31902-0701

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Benjamin J. Golden

Office Address: 5207 Finisterre Drive

Panama City, Florida 32408
(City) (Zip code)

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.


(Registered agent's signature)

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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:**

☒ Manager Name: Kaizad P. Shroff

☐ Member Address: P.O. Box 701

☐ Authorized Columbus, GA. 31902-0701

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Maneck Family LLLP

☒ Member Address: P.O. Box 701

☐ Authorized Columbus, GA 31902-0701

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ 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. 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.

Kaizad P. Shroff
Signature of an authorized person

Kaizad P. Shroff

Typed or printed name of signee

STATE OF GEORGIA

Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

Beaco Properties, LLC
a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 25189791
Date Inc/Auth/Filed: 05/01/2023
Jurisdiction : Georgia
Print Date : 05/16/2023
Form Number : 211



Brad Raffensperger

Brad Raffensperger
Secretary of State