

M23000007247

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

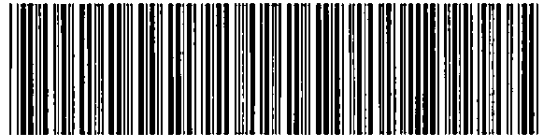
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W23-76875

Office Use Only



200408390012

FILED

2023 MAY 31 AM 11:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

2023 MAY 31 PM 3:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A Jones



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 1, 2023

CSC

SUBJECT: ANKAA GLOBAL LOGISTICS, LLC
Ref. Number: W23000076875

RESUBMIT
Please give original
submission date as file date.

We have received your document for ANKAA GLOBAL LOGISTICS, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The titles for the persons listed in section 8 are cut off.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

Letter Number: 423A00012440

RECEIVED
2023 JUN -5 PM 3:54
TALLAHASSEE, FLORIDA



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations
From: Alexxis Weiland-Sorenson
Ext: 61592
Date: 05/31/23
Order #: 1218533-1
Re: Ankaa Global Logistics, 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:
I20000000195

AUTHORIZATION

A handwritten signature in black ink, appearing to read 'Alexxis Weiland-Sorenson', is written over the word '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
Division of Corporations**

SUBJECT: Ankaa Global Logistics, 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:

Kristen Yates

Name of Person

Silverman Schermer, PLLC

Firm/Company

100 SE 3rd Avenue, Suite 1850

Address

Fort Lauderdale, FL 33394

City/State and Zip Code

tammylove@sgws.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristen Yates

954

314-4000

at ()

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. Ankaa Global Logistics, 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. Delaware 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 1600 N.W. 163rd Street 6. 1600 N.W. 163rd Street
(Street Address of Principal Office) (Mailing Address)
Miami, FL 33169 Miami, FL 33169

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

Name: Steven J. Schermer
Office Address: 100 SE 3rd Avenue, Suite 1850
Fort Lauderdale, Florida 33394
(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.

By: [Signature]
(Registered agent's signature)

FILED
2023 MAY 31 AM 11:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Wayne E. Chaplin

☐ Member Address: 1600 NW 163RD STREET

☐ Authorized MIAMI, FL 33169

Person _____

☒ Other CEO ☐ Other _____

☐ Manager Name: Bennett Glazer

☐ Member Address: 1600 NW 163RD STREET

☐ Authorized MIAMI, FL 33169

Person _____

☒ Other Executive Vice President ☐ Other _____

☐ Manager Name: Melvin A. Dick

☐ Member Address: 1600 NW 163RD STREET

☐ Authorized MIAMI, FL 33169

Person _____

☒ Other Sr. Vice President ☐ Other _____

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

☐ Manager Name: Steven R. Becker

☐ Member Address: 1600 NW 163RD STREET

☐ Authorized MIAMI, FL 33169

Person _____

☒ Other Executive VP, Treasurer ☐ Other _____

☐ Manager Name: Lee F. Hager

☐ Member Address: 1600 NW 163RD STREET

☐ Authorized MIAMI, FL 33169

Person _____

☒ Other Executive VP, Secretary ☐ Other _____

☐ Manager Name: Thomas Greenlee

☐ Member Address: 1600 NW 163RD STREET

☐ Authorized MIAMI, FL 33169

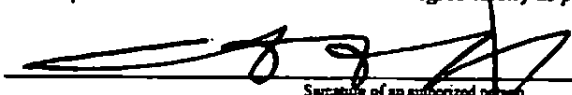
Person _____

☒ Other Executive Vice President ☐ 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.



Signature of an authorized person

Lee F. Hager

Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ANKAA GLOBAL LOGISTICS, 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 THIRTY-FIRST DAY OF MAY, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ANKAA GLOBAL LOGISTICS, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF MAY, A.D. 2023.

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



7482927 8300

SR# 20232556216

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203451309

Date: 05-31-23