M23000009307

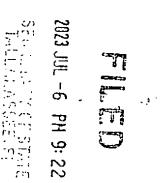
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
FICK-OF WATE
(Business Entity Name)
(Document Number)
(,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
ļ

Office Use Only



000411664480

07/08/23--01010--018 **125.00



COVER LETTER

.

TO:	Registration Section Division of Corporations	
	ELH Consulting, LLC	
SUBJE	CT:	
		Name of Limited Liability Company
		ed Liability Company for Authorization to Transact Business in Florida." Certificate of r the above referenced foreign limited liability company to transact business in Florida.
Please r	return all correspondence concerning t	this matter to the following:
	Eric Hoter	
		Name of Person
	ELH Consulting, LLC	
		Firm/Company
	1100 S Miami Ave, Apt. 341	0
		Address
	Miami, FL 33130	
		City/State and Zip Code
	eric_hoter@outlook.com	
	E-mail ad	dress: (to be used for future annual report notification)
For furt	her information concerning this matte	r, please call:
	Eric Hofer	at (385) 414-9835
	Name of Contact P	erson at (385) 414-9835 Daytime Telephone Number
	Mailing Address: Registration Section	Street Address: 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
	≯\$125.00 Filing Fee ☐ \$130.0	g amount: RIDA DEPARTMENT OF STATE. 00 Filing Fee &

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: ELH Consulting, 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 "L.L.C," or "L.L.C," Utah (Jurisdiction under the law of which foreign limited liability company is organized) N/A 4. ___ (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability.) 1100 S Miami Ave, Apt 3410 1100 S Miami Ave, Apt 3410 (Street Address of Principal Office) (Mailing Address) Miami, FL 33130 Miami, FL 33130 7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) Registered Agents Inc Name: 7901 4th St N STE 300 Office Address: , Florida 33702 St. Petersburg (City)

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.

Dalid Soveris		
•	(Registered agent's signature)	

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	<u>v:</u>	Name and Address:
■Manager	Name: 1100 S Miami Ave, Apt 3410	□Manager	Name:	
■Member	Address:	□Member	Address:	
□Authorized		\square Authorized		
Person		Person		
□Other	Other	□Other		Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
□Other	Other	□Other		Other
□Manager	Name:	□Manager	Name:	
□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. 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.

-20	DU		
Eric Hofer	J	Signature of an authorized person	
		Exped or printed name of signer	



Utah Department of Commerce

Division of Corporations & Commercial Code

160 East 300 South, 2nd Floor, PO Box 146705 Salt Lake City, UT 84114-6705 Service Center: (801) 530-4849 Toll Free: (877) 526-3994 Utah Residents

Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov

06/26/2023 12943467-016006262023-3419017

CERTIFICATE OF EXISTENCE

Registration Number:

12943467-0160

Business Name:

ELH CONSULTING, LLC

Registered Date:

July 15, 2022

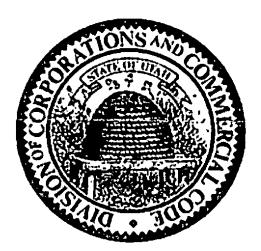
Entity Type:

LLC - Domestic

Status:

Current

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



L. Veillette

Leigh Veillette Director Division of Corporations and Commercial Code