# M2300010812

(Requestor's	Name)			
(Address)	<del>.</del>			
(Address)				
(City/State/Zi	p/Phone #)			
PICK-UP W	AIT MAIL			
(Business Er	tity Name)			
(Document Number)				
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W23-105927



August 3, 2023

ALBERT LEWIS 513 PITNEY ROAD COLUMBIA, SC 29212 US

SUBJECT: LAPA INVESTMENTS LLC

Ref. Number: W23000105927

We have received your document for LAPA INVESTMENTS LLC and check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

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

Letter Number: 023A00017540

Ariel Jones Regulatory Specialist II

#### **COVER LETTER**

то:	Registration Section Division of Corporations	
SUBJ	LAPA Investments LLC ECT:	
.,000,		ne of Limited Liability Company
		Company for Authorization to Transact Business in Florida," Certificate of e referenced foreign limited liability company to transact business in Florida
Please	return all correspondence concerning this matter	to the following:
	Albert Lewis	
		Name of Person
	LAPA Investments LLC	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company
	513 Pitney Road	
		Address
	Columbia, SC 29212	
		City/State and Zip Code
	simplyk100@gmail.com	
	E-mail address: (to b	pe used for future annual report notification)
For fur	rther information concerning this matter, please ca	all:
	Albert Lewis	404 310-5006 at ( )
	Name of Contact Person	Area Code Daytime Telephone Number
	Mailing Address:	Street Address:
	Registration Section	Registration Section
	Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DE  ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fe  Certificate	ee & 🔲 \$155.00 Filing Fee & 🗏 \$160.00 Filing Fee. Certificate

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

(If name unavailable, enter alternate	name adopted for the purpose of transacting bu	siness in Florida. The alter	nate name must include "Limited Liabi	hty Company," "L.L.C," or "LLC.")
South Carolina		3.		
(Jurisdiction under the law of v	shich foreign limited liability company is organ	ized)	(FEI number,	if applicable)
I				
	(See sections 605,0904 & 605,0905, F.S.	, if prior to registration.) to determine penalty liab	ilúy)	
2575 S Hwy 17-92		51	3 Pitney Road	
5. Street Address of Principal Office)		6	(Mailing Address)	
Casselberry FL 32707		Со	lumbia, SC 29212	
. Name and street addre	ss of Florida registered agent: (P	.O. Box NOT acc	eptable)	20
	ss of Florida registered agent: (P Albert Lewis	.O. Box <u>NOT</u> acc	eptable)	2023 AUS 1
Name and street addre Name: Office Address:		.O. Box <u>NOT</u> acc	eptable) 	2023 AUS 17 PH
Name:	Albert Lewis	.O. Box <u>NOT</u> acc	 	2023 AUG 17 PH 4: 17
Name:	Albert Lewis 2575 S Hwy 17-92	.O. Box <u>NOT</u> acc	32707	2023 AUS 17 PH 4: 17

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: Name: Albert Lewis ■ Manager 2575 S Hwy 17-92 Address: \_\_ ☐ Member Address: \_\_\_\_\_ □Member Casselberry, FL 32707 ☐ Authorized □ Authorized Person Person □Other\_\_\_\_ □Other\_\_\_\_ □Other\_\_\_\_ □Other Name: Kevin Lewis Name: \_\_\_\_\_ Manager □Manager 2575 S Hwy 17-92 Address: \_ □Member □Member Address: \_\_\_\_\_\_\_\_ Casselberry, FL 32707 □ Authorized □ Authorized Person Person □Other\_\_\_\_\_ □Other \_\_\_\_ □Other\_\_\_\_\_ □Other Name: Danny Brown Name: \_\_\_\_\_ **■**Manager □Manager 2575 S Hwy 17-92 Address: \_\_\_\_\_\_\_\_\_\_ □ Member □Member Casselberry, FL 32707 ☐ Authorized □ Authorized Person Person □Other\_\_\_\_\_ □Other\_\_\_\_\_ □ Other\_\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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. ignature of an authorized person

Albert Lewis
Typed or printed name of signee

# The State of South Carolina



## Office of Secretary of State Mark Hammond

### **Certificate of Existence**

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

Lapa Investments LIC, a limited liability company duly organized under the laws of the State of South Carolina on November 28th, 2018, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 27th day of July, 2023.

Mark Hammond, Secretary of State