10/12/23 4:29 PM

Division of Corporations

Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INTERSTATE FILINGS LLC

Account Number : I20110000086 Phone : (718)569-2703 Fax Number ; (718)504-7890

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Foreign Limited Liability Company 4842 SW ARCHER ROAD LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$125,00

To:

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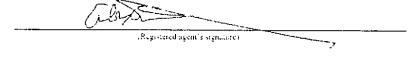
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 805,0002, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY. COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign	Lumied Labdity Company oust include Timite	а Главическио ру	ny, "II.C," or "II.C."			
rume unavad dde lental Afethafa	Panie adopted for the purpose of transacting business or 81	locata. Enclateracte	cance wast include "I moted field	nuty Company 1981, Company		
DELAWARE						
chirieda hoo under the law of v	reduction under the law of which foreign leaded liability company is organized)		(FLI mirabe) of applicable)			
	(Diffe Print to a reader business in Plants of profession (See securing 691-7901 & 603-7503), S. to defermi	registration (not penalty habitaty)				
2071 Flatbush Avenue, Suite 22		2071 (2071 Flatbush Avenue, State 22			
et Address of Pincipal (Office)		o — a	(Malene Address)			
Brooklyn, NY 11234	·	Broak	lvn, NY 11234			
Name and street address	ss of Florida registered agent (P.O. Box	NOT accepta	blei			
Name:	INTERSTATE AGENT SERVICES, I			ZOZ3 OCT Sealla Talla		
Office Address	100 SE 2ND STREET SUITE 200 #20	99		12		
	MIAMI		34131 Florida	PMIO: 53		
	(Cox)		Map of de .	- 52 - 52		

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.



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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:	Title or Capacity:		Name and Address:
□Manager	Name: An Katz	II Manager	Name	
□Member	Address. 2071 Flatbush Avenue State 22	□ Member		
□Authorized	Brooklyn, NY 11234	Z Authorized		
Person		Person		
≝Other_MGMB	[]Other	_Other		[10ther
	Name:	_ Manager	Name	
□Member	Address:	□ Member		
∃Aurhouzed		□ Anthorized		
Person		Person		
□Other		TlOther		TiOther
□Manager	Name.	II Manager	Name	
□Member	Aildress:	_Member	Address	
□Authorized		Z Authorized		
Person		Person		
⊒Other	Other	(Thei		

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 or 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 fellow as provided for in \$817,155, F.S.





Page 1

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

DELAWARE, DO HEREBY CERTIFY "4842 SW ARCHER ROAD 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 ELEVENTH DAY OF OCTOBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "4842 SW ARCHER ROAD LLC" WAS FORMED ON THE TENTH DAY OF OCTOBER, A.D. 2023.

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

Authentication: 204349309

Date: 10-11-23