Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H230003655383)))



H230003655383ABC2

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ALLSTATE CORPORATE SERVICES CORP

Account Number : I20040000031 : (800)906-9220 Fax Number : (800)906-9880

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_

## Foreign Limited Liability Company RENDOR LLC

Certificate of Status	l l
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

To:

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

IN COMPLIANCE WITH NECTION 605,0002. FLORIDA STATUTEN THE FOLLOWING IN SUBMITTED TO REGISTER A FORFIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS AN THE STATE OF HI ORDA L RENDOR LLC (Name of Foreign Limited Unbility Company trinst include "Fronted Liability Company." [LL.C.," or "D.C.") (If name unavail offe, enter alternate name adopted for the purpose of france unavail offe, enter alternate name must include "Limited Capitaly Company," "C.L.C. or "LC." or "LC." State of New Jersey furisdiction under the law of which foreign limited liability company is organized) October 1, 2023 (Date that transacted business in Florida, d prive to registration) (See accidence 03 1904 & 695 0005, F.S. to determine penalty liability) 323 Sunny Isles Blvd., Suite 737 323 Sunny Isles Blvd., Suite 737 5. (Street Address of Principal Office) Sunny Isles Beach, FL 33160 Sunny Isles Beach, FL 33160 7. Name and street address of Florida registered agent. (P.O. Box. NOT acceptable) Mark Francazio Name. 323 Sunny Isles Blvd., Suite 737 Office Address: Sunny Isles Beach

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.

/S/ Mark Francazio	
(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:	Name and Address:
□Manager	Name. Mark Francazio	□ Manager	Name
<b>≣</b> Member	Address: 323 Sunny Isles Blvd	□ Member	Address.
□Authorized	Suite 737	☐ Authorized	
Person	Sunny Isles Beach, FL 33160	Person	
□Other	□Other	TOther	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	(nher	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 filting 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 outh 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 \$817,155, F.S.

Signature of an authorized persoa			
Mark Francazio			

## STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

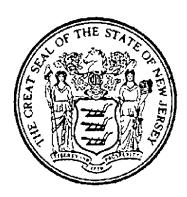
## RENDOR LLC 0450576083

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on December 09, 2020.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

MARK FRANCAZIO 1700 PARK AVENUE APT, 1007 WEEJJAWKEN, NJ 07086



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Scal at Trenton, this 19th day of September, 2023

Alex of Mun

Elizabeth Maher Muoio State Treasurer