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

Office Use Only



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COVER LETTER

TO:

Registration Section

Ultra RE LLC SUBJECT:	
Nan	ne of Limited Liability Company
	Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florid
Please return all correspondence concerning this matter	to the following:
	Heather Cavanaugh
	Name of Person
	Formaro Law
	Firm/Company
	1022 S LaGrange Rd.
	Address
	LaGrange, IL 60525
	City/State and Zip Code
	porate@fornarolaw.com
	be used for future annual report notification)
For further information concerning this matter, please co	all:
Heather Cavanaugh	708 639-4320 at ()
Name of Contact Person	at ()
Mailing Address: Registration Section Division of Corporations	Street Address: Registration Section Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	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 DE ■ \$125.00 Filing Fee □ \$130.00 Filing F Certificate	ce & 🔲 \$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 (05.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

f name unavailable, enter alternate r	name adopted for the purpose of transacting business in Fl	orida. The alternate name must include "Limited Liabil	ity Company," "L.L.C," or "Li.C.")
Delaware		3. (FEI number,	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(FEI number,)	d applicable)
	(Date first transacted business in Florida, if prior to	registration)	<u> </u>
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determi	ne penalty liability)	
2101 N Federal Hwy		2101 N Federal Hwy	
treet Address of Principal Office)		6. (Mailing Address)	
STE 201		STE 201	12
Pompano Beach, FL 3.	3062	Pompano Beach, FL 33062	D23 NO
. Name and <u>street addres</u>	ss of Florida registered agent: (P.O. Box Corporation Service Company	NOT acceptable)	TARY OF STANCESSEE.
Name:			[편] 50
Office Address:	1201 Hays St		•
	Tallahassee	32301 Florida	
	(City)	, Florida (Zip code)	_
	tance: gistered agent and to accept service of p tion, I hereby accept the appointment a: ions of all statutes relative to the proper	s registered agent and agree to act in t	this capacity. I further a

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to

Name and Address:	<u>Title or Capacit</u>	<u>y:</u>	Name and Address
Name: Dimitar Dimitrievski	□Manager	Name:	
Address: 2101 N Federal Hwy	□Member	Address:	
STE 201	□Authorized		
Pompano Beach, FI. 33062	Person		
□Other	□Other		□Other
Name:	□Manager	Name:	
Address:	□Member	Address:	
	□Authorized		
	Person		
Other	Other	<u> </u>	Other
Name:	□Manager	Name:	
Address:	□Member	Address:	
	□Authorized		
	Person		
□Other	□Other		□ Other
	Name: Dimitar Dimitrievski Name: 2101 N Federal Hwy Address: STE 201 Pompano Beach, FL 33062 DOther Name:	Name: Dimitar Dimitrievski	Name: Dimitar Dimitrievski

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.

22-2
Signature of an authorized person
Dimitar Dimitrievski, Manager
1 A section of the se

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ULTRA RE 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 SEPTEMBER, A.D. 2023.



Authentication: 204133565

Date: 09-11-23