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





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COVER LETTER

TO:

	ommercial Buildings Management LL	С				
c	Name of Limited Liability Company					
		Company for Authorization to Transact Business in Florida," Certifical referenced foreign limited liability company to transact business in Flo				
se return all	correspondence concerning this matter t	o the following:				
	Nicholas Joo					
		Name of Person				
	Commercial Buildings Managemer	nt LLC				
	 -	Firm/Company				
	4990 Sadler PL Unit 4891					
		Address				
	Glen Allen, VA 23060					
	С	ity/State and Zip Code				
	nickjoo2003@gmail.com					
_	E-mail address: (to be	used for future annual report notification)				
urther infort	mation concerning this matter, please cal	II:				
Yong Yi		804 873-8566				
	Name of Contact Person	at () Area Code Daytime Telephone Number				
Mailing Address:		Street Address:				
Registration Section		Registration Section				
Division of Corporations P.O. Box 6327		Division of Corporations The Course of Tallahassee				
Taltahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Tallahassee, FL 32303				
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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 LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

tallic distriction, the distriction	name adopted for the purpose of transacting business in Flori	da. The alternate name must include "Limited I	Liability Company," "L.L.C," or "LLC
Virginia		3 93-460145	·8
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(FEI nuit	iber, (Lapplicable)
12/01/2023			
	(Date first transacted business in Florida, if prior to reg (See sections 605,0904 & 605,0905, F.S. to determine	istration.) penalty liability)	
4990 Sadler PL #489	91, Glen Allen VA 23060	4990 Sadler PL #4891, (Glen Allen VA 23060
eet Address of Principal Office)		6. (Mailing Address)	
			
Name and street address	ss of Florida registered agent: (P.O. Box 2	VOT accentable)	0073 HOV 29
. Turne and <u>Meet address</u>	without registered agent. (1.0.100.2	ucceptuoic)	FIL V 20
	Yong Yi		T .
Name:			7. 0.
	4258 Rock Hill Loop		. <u>O</u>
Office Address:			55
	Apopka	32712	
	(City)	, Florida(Zin code)	

and accept the obligations of my position as registered agent.

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:

According Plants Plan

■Manager	Name: Nicholas Joo	■Manager	Name: Yong Yi
□Member	Address: 4990 Sadler PL		Address: 4228 Rock Hill Loop
□Authorized	Unit 4891	3	Apopka, FL 32712
Person	Glen Allen, VA 23060	Person	
□Other	□ Other	□Other	Other
□Manager	Name:	Manager	Name:
□Member	Address:	□Member	Address:
□Authorized			
Person		Person	
□Other	Other	Other	Other
□Manager	Name:		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.

Nicholas Joo

Fyped or printed name of signee

Commonwealth of Hirginia



State Corporation Commission

CERTIFICATE OF FACT

1 Certify the Following from the Records of the Commission:

That Commercial Buildings Management LLC is duly organized as a Limited Liability Company under the law of the Commonwealth of Virginia;

That the Limited Liability Company was formed on November 18, 2023; and

That the Limited Liability Company is in existence in the Commonwealth of Virginia as of the date set forth below.

That the limited liability company is current in the payment of all registration fees assessed against it by the Commission pursuant to the Virginia Limited Liability Company Act as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

November 29. 2023

Bernard J. Logan, Clerk of the Commission

CERTIFICATE NUMBER: 2023112919529296