Division of Corporations

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.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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 Newton Building & Development, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

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Help

DEC 05 SOS3 K. Brumbley

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

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

imme unavailable, enter alternate i	name adopted for the purpose of transacting business in Fior	rida. The	alternate name must include "Limited Link	ulity Company	." "L.Ł C	;;; or "LLC
Washington		3	02-0554106			
(Jurisdiction under the law of which foreign lumited hability company is organized)		J.	(EEI number, if applicable)			
	(Date first transacted business in Flurida, if prior to re (See sections 605,0904 & 605,0905, F.S. to determine	gistratio e penalty	n.) Hability)			
7901 4th St N STE 300)	6	7901 4th St N STE 300			
reet Address of Principal Office)		0.	(Mailing Address)			
St. Petersburg FL 3370	2		St. Petersburg FL 33702			
				· <u>-</u> -	207	
Name and street address	ss of Florida registered agent: (P.O. Box	SIOT	accontable)		3 3 3	
tvane and signer habit.	a or riorisa regardied agent. (1.17. Dos.		acceptance,	· •	30	=======================================
Name:	Northwest Registered Agent LLC			•	<u>.</u> >	G ²
Name:					44 :0: th	
Office Address:	7901 4th St N STE 300		····	;	1	
	St. Petersburg		101autus 33702			
	(Ску)		, Florida (Zip code)			

7-14-		
·	(Registered agent's signature)	

11/30/2023 10.55:05 PST To: 18506176383 Page: 3/4 From: Registered Agents Inc Fax: 8134365206

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: Roger Newton	□Manager	Name:	
Member □Authorized Person □Other	Address:	□ Member □ Authorized Person □ Other		□Other
□Manager □Member	Name:	☐ Manager ☐ Member		
□Authorized Person		∏Authorized Person		
□Other	Other	□Other		□ Other
⊔Manager □Member	Name:	⊔Manager □Member		
☐Authorized Person		□ Authorized Person		
□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.

What Granting		
	Signature of an authorized person	
Nat Smith		
	Exped or printed name of stenee	



Secretary of State

I, STEVE R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

NEWTON BUILDING & DEVELOPMENT, LLC

1 CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 02/26/2002.

1 FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

1 FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 11/30/2023 UBI Number: 602 185 013



Given under my hand and the Seat of the State of Washington at Olympia, the State Capital

tu R Hollie

Steve R. Hobbs, Secretary of State

Date Issued 11/30/2023