

M23000015764

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

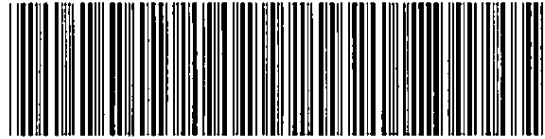
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/28/23--01035--010 **125.00

2023 NOV 27 PM 4:43

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DEVELOPMENT SERVICES COLLECTIVE, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

SHELLIE RANSOM-JACKSON

Name of Person

BENCHMARK CONSTRUCTION CONSULTING & MANAGEMENT LLC

Firm/Company

1120 NW 87 ST

Address

MIAMI, FL 33150

City/State and Zip Code

SHELLIE@BENCHMARKCCM.NET

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SHELLIE RANSOM-JACKSON

305 733-2752
at (_____) _____

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
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 DEPARTMENT OF STATE**

☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

**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 COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. DEVELOPMENT SERVICES COLLECTIVE, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. DELAWARE

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 93-4025968

(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1120 NW 87 STREET

(Street Address of Principal Office)

MIAMI, FL

33150

6. 1120 NW 87 STREET

(Mailing Address)

MIAMI, FL

33150

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

SHELLIE RANSOM-JACKSON

Office Address:

1120 NW 87 ST

MIAMI

(City)

Florida

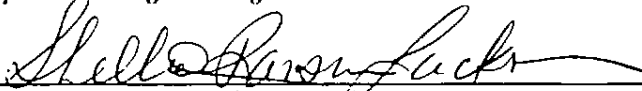
33150

(Zip code)

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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.


(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:**

☒ Manager Name: BENCHMARK CONSTRUCTION CONSULTING & Management, LLC

☐ Member Address: 1120 NW 87 ST

☒ Authorized Person MIAMI, FL 33150

SHELLIE RANSOM-JACKSON

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized Person _____

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized Person _____

☐ Other ☐ Other

Title or Capacity: **Name and Address:**

☒ Manager Name: BLUE LOTUS INVESTMENTS,

☐ Member Address: 19109 N. GARDENIA AVE

☒ Authorized Person WESTON, FL 33332

SHIV NEWALDASS

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized Person _____

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

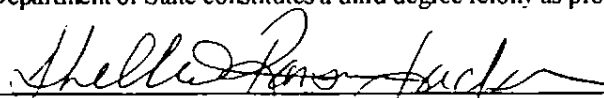
☐ Authorized Person _____

☐ 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.


Signature of an authorized person

SHELLIE RANSOM-JACKSON

WAIVER AND RELEASE OF LIEN UPON PROGRESS PAYMENT

The undersigned lienor, in consideration of the sum of \$3,750.00, hereby waives and releases its lien and right to claim a lien for labor, services, or materials furnished through 10/19/23 to JLL on the job of JPMorgan Chase N.A. to the following property:

Longleaf Pine Parkway
St. Johns County, FL

This waiver and release does not cover any retention or labor, services, or materials furnished after the date specified.

DATED on October 19, 2023.

Benchmark Construction Consulting & Management, LLC
1120 NW 87 Street
Miami, FL. 33150

By: Shellie Ransom-Jackson

Sworn to (or affirmed) and subscribed before me this 19th day of JOctober, 2023, by Shellie Ransom-Jackson.

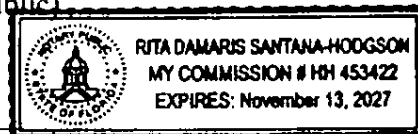
Rita Damaris Santana-Hoogson

(Signature of Notary Public - State of Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known ✓ OR Produced Identification

Type of Identification Produced _____



Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "DEVELOPMENT SERVICES COLLECTIVE, 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 EIGHTH DAY OF NOVEMBER, A.D. 2023.



Jeffrey W. Bullock, Secretary of State

2471681 8300

SR# 20233827872

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 204552208

Date: 11-08-23