

1/11/24, 2:01 PM

Division of Corporations

M2400000482
 Florida Department of State
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To:

Division of Corporations
 Fax Number : (850)617-6383

From:

Account Name : RCA ACCOUNTING SERVICES CORP
 Account Number : I20180000102
 Phone : (305)799-7633
 Fax Number : (305)564-6857

****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
 CLRS GROUP LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

RECEIVED
 2024 JAN 16 PM 12:25
 DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

2024 JAN 16 PM 7:34
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Help



January 12, 2024

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RCA ACCOUNTING SERVICES CORP

SUBJECT: CLRS GROUP LLC
REF: W24000003664

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any further questions concerning your document, please call (850) 245-6051.

Ariel Jones
Regulatory Specialist II
Registration Section

FAX Aud. #: H24000016099
Letter Number: 624A00000709

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

CLRS GROUP 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. PUERTO RICO 3. 66-0985516
(Jurisdiction under the law of which foreign limited liability company is organized) (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. 7047 NW 104 Court 6. 7047 NW 104 Court
(Street Address of Principal Office) (Mailing Address)

Doral, FL 33178 Doral, FL 33178

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

Name: LA ROSA SOLARES, CARLOS

Office Address: 7047 NW 104 Court

DORAL, Florida 33178
(City) (Zip code)

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.

141 Carlos La Rosa Solares
(Registered agent's signature)

FILED
2024 JAN 16 PM 7:34
CLERK OF DISTRICT COURT
13th Judicial Circuit
Doral, Florida

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]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☒ Manager	Name: <u>LA ROSA SOLARES, CARLOS</u>	☐ Manager	Name: _____
☐ Member	Address: <u>7047 NW 104 Court</u>	☐ Member	Address: _____
☐ Authorized	<u>Doral, FL 33178</u>	☐ Authorized	_____
Person	_____	Person	_____
☐ Other _____	☐ Other _____	☐ Other _____	☐ 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 _____	☐ 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.

121 Carlos La Rosa Solares

Signature of an authorized person

LA ROSA SOLARES, CARLOS

Typed or printed name of signer

TRANSLATION

COAT OF ARMS
(DEPARTMENT OF THE STATE OF PUERTO RICO)

Puerto Rico Government

CERTIFICATE OF ORGANIZATIONS

I, **Omar J. Marrero Diaz**, Secretary of The State of Government of Puerto Rico;

CERTIFY: that **CLR GROUP LLC**, registration number **470386**, it is a **Domestic For Profit Limited Liability Company** organized under the laws of Puerto Rico today, **August 5th, 2021, at 3:46 PM.**

GREAT SEAL OF
THE FREE
STATE
ASSOCIATE OF
PUERTO RICO

IN WITNESS WHEREOF, I have hereunto set my signature and stamped the Great Seal of the Government of Puerto Rico, in the city of San Juan Puerto Rico, today **5th of August 2021.**

[signature]

Omar J. Marrero Diaz
Secretary of the State

2095361 - \$250.00

----- End of Translation -----

CERTIFICATION BY TRANSLATOR

*I, Shandira Ledesma-Murillo, Certify That I Am Fluent in Both the English And Spanish Languages, That I Am Competent to Perform This Translation and that this Document Is an Accurate Translation of The Document being presented by the client **CARLOS LA ROSA SOLARES.***

Signature:



Date: 01/12/2024

Name:

SHANDIRA LEDESMA-MURILLO

Add:

9100 S. DADELAND BLVD, SUITE# 100, MIAMI, FL 33156 ☎ PH: 786-475-9414



Gobierno de Puerto Rico

CERTIFICADO DE ORGANIZACION

Yo, **Omar J. Marrero Díaz**, **Secretario de Estado** del Gobierno de Puerto Rico;

CERTIFICO: Que **CLR GROUP LLC** número de registro **470386**, es una **Compañía de Responsabilidad Limitada Doméstica Con Fines de Lucro** organizada bajo las leyes de Puerto Rico hoy, **5 de agosto de 2021**, a las **03:46 PM**.



EN TESTIMONIO DE LO CUAL, firmo el presente y hago estampar en él el Gran Sello del Gobierno de Puerto Rico, en la ciudad de San Juan, Puerto Rico, hoy, **05 de agosto de 2021**.

A handwritten signature in black ink, appearing to be 'Omar J. Marrero Díaz'.

Omar J. Marrero Díaz
Secretario de Estado