# M24000004289

(Red	questor's Name)	
(Ádo	dress)	
(Add	dress)	
(City	y/State/Zip/Phone #)	<u> </u>
PICK-UP	☐ WAIT	MAIL
/Pur	singa Catit Marra	
eud)	siness Entity Name)	
(Do	cument Number)	
Certified Copies	Certificates of	of Status
Special Instructions to Filin	g Officer:	
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Office Use Only



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APR 0.5 2024 K. Brumbley



March 29, 2024

CSC

SUBJECT: ARECA HOLDINGS V, LLC

Ref. Number: W24000050822



We have received your document for ARECA HOLDINGS V, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

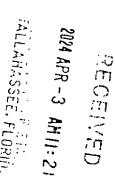
Please list thte complete business name is section 8.,

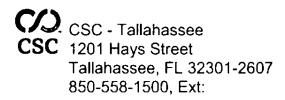
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

Letter Number: 524A00006825





To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext:

Date: 03/28/24 Order #: 1466160-1

Re: Areca Holdings V, LLC Processing Method: Routine

### TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$125.0 - FL State Account Number:

120000000195

Certificate of Good Standing from State of Incorporation

**AUTH** 

Please take the following actions.

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## **COVER LETTER**

..

то:	Registration Section Division of Corporations						
SUBJE	Areca Holdings V, LLC						
Name of Limited Liability Company							
		ed Liability Company for Authorization to Transact Business in Florida," Certificate of r the above referenced foreign limited liability company to transact business in Florida.					
Please	return all correspondence concerning t	this matter to the following:					
	David Mehlman						
		Name of Person					
	Areca Holdings V, LLC						
Firm/Company							
2900 NE 2nd Avenue, Apt. 571, Miami FL 33137							
Address							
	Miami, FL 33137						
City/State and Zip Code							
	david@arecaholdings.con	n					
	E-mail ad	dress: (to be used for future annual report notification)					
For fur	ther information concerning this matte	er, please call:					
David Mehlman		917 837-1357					
	Name of Contact P						
Mailing Address: Registration Section		Street Address: Registration Section					
Division of Corporations		Division of Corporations					
P.O. Box 6327		The Centre of Tallahassee					
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
	■ \$125.00 Filing Fee □ \$130.0	g amount:  RIDA DEPARTMENT OF STATE  10 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate  Certificate of Status Certified Copy 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:

(If name unavailable, enter alternate	name adopted for the purpose of transacting business in Flo	rida. The alternate	name must include "Limited Liab	dity Company	'," "L.IC	," or "LLC.")
Delaware 2.		3.				
(Jurisdiction under the law of w	thich foreign limited liability company is organized)	J	(FEI number,	if applicable	)	
February 8, 2023						
	(Date first transacted business in Florida, if prior to r (See sections 605.0904 & 605.0905, F.S. to determine	egistration.) se penalty liability	)			
David Mehlman 5.			d Mehlman			
Street Address of Principal Office)		6	Mailing Address)		***	
2900 NE 2nd Avenue, Apt. 571		2900	NE 2nd Avenue, Apt.	571		
Miami, FL 33137		Mian	ni, FL 33137	•	202	
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT accept	able)	<del>-</del> .	H/R 28	
Name:	Corporation Service Company		_		11 : 11 HV	
Office Address:	1201 Hays Street		_		ŧ	
	Tallahassee		32301			
	(City)		, Florida (Zip code)			
Registered agent's accep			(Cap vode)			

(Registered agent's signature)

Ву:

#### 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: Areca Holdings Managemnet, LLC Name: **■**Manager Name: □Manager 2900 NE 2nd Avenue, Apt. 571 □Member Address: □Member Address: Miami, FL 33137 ☐ Authorized ☐ Authorized Person Person Other\_\_\_\_ Other Other Other Name: David Mehlman □Manager □Manager Name: Address: \_\_\_ 2900 NE 2nd Avenue, Apt. 571 □Member □Member Address: \_\_\_\_\_ Miami, FL 33137 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. Nonindexed 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

Typed or printed name of signee

David Mehlman

Page 1



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

DELAWARE, DO HEREBY CERTIFY "ARECA HOLDINGS V, 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 TWENTY-EIGHTH DAY OF MARCH, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ARECA HOLDINGS"

V, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF APRIL, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 203134048

Date: 03-28-24