W24000007270

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
Way-77755						

Office Use Only



000428385730

04/29/24--01003--016 *+125.00

RECEIVED

APR 2 6 2024

OIVISION OF CORPORATIONS



May 21, 2024

JEREMY FITZGERALD 1243 S. VICTORIA AVE. LOS ANGELES, CA 90019 US

SUBJECT: GENERATIONZ L.L.C. Ref. Number: W24000077755

We have received your document for GENERATIONZ L.L.C. and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

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

Ariel Jones Regulatory Specialist II

www.sunbiz.org

Letter Number: 324A00011064



COVER LETTER

RIEZ	GENERATIONZ L.L.C.				
DJ C.X.		ne of Limited Liability Company			
e enck istence	osed "Application by Foreign Limited Liability e, and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certife referenced foreign limited liability company to transact business in			
ase re	turn all correspondence concerning this matter	to the following:			
	Jeremy Fitzgerald				
		Name of Person			
	Generationz LLC				
		Firm/Company			
	1243 S. Victoria Ave.	, ,			
	Address				
	Los Angeles				
		htty/State and Zip Code			
	CA 90019				
		e used for future annual report notification)			
or turthe	er information concerning this matter, please ca	H:			
i	Erika Fitzgerald	310 709-7949			
	Name of Contact Person	at () Area Code Daytime Telephone Number			
Mailing Address: Registration Section Division of Corporations		Street Address:			
		Registration Section Division of Corporations			
	2.O. Box 6327	The Centre of Tallahassee			
	Fallahassee, FL 32514	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
t:	Enclosed is a check for the following amount:				
	Please make check payable to: FLORIDA DEF				

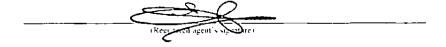


APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLANCE WITH SECTION 605,002, FLORIDA STATUTEN THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA

(Name of Foreign).	.imited Liability Company, must include "Limite	d Liability	Company," "L. L. C., "	er "LLC")		
elt name unavailable, enter alternate na	ime adopted for the purpose of transacting business in E	londa. The a	lternate name must inclu-	ie "I united Liability Company,"	"t. t. C," or "	I.I.C.")
California		3				
2. (Jurisdiction under the law of wh	ich foreign limited liability company is organized)	.,	3. (EFI number, of applicable)			
4.	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605 0905, U.S. to determ	registration one penalty i	ı ıalsılıty)			
1243 S. Victoria Ave			1243 S. Victoria Ave			
5. (Street Address of P incipal Office)			(Mailing Address)		12	S S
Los Angeles, CA 90019			Los Angeles			ECRE
		-	CA 90019		-0 -0	TARY OF
7. Name and street address	of Florida registered agent: (P.O. Box	. <u>NOT</u> a	cceptable)		्र अ 18	F STATE PORATIONS
Name:	Erika Fitzgerald				σ.	7.
Office Address:	1001 Coronado Crt Unit 9					
	Lake Placid		, Floride	3852		
	(Cuy)			(Zip code)		

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.



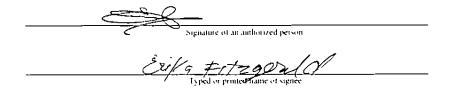


8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
■Manager	Name: DANIEL S. FITZGERALD	□Manager	Name:
■Member	Address:AMARINA	■Member	Address: 1243 S. VICTORIA AVE
□Authorized	MARINA DEL REY CA 90292	□Authorized	LOS ANGELES, CA 90119
Person	YES	Person	YES
□Other	Other	□Other	□Other
∐Manager	Name: ERIKA FITZGERALD	⊡Manager	Name:
■Member	Address: 1001 CORONADO CRT. #9	□Member	Address:
□Authorized	LAKE PLACID, FL 33852	□Authorized	
Person	YES	Person	
□Other	Other	□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		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. Lam 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.





I, SHIRLEY N. WEBER, PH.D., California Secretary of State. hereby certify:

Entity Name:

GENERATIONZ L.L.C.

Entity No.:

202111710672

Registration Date:

04/23/2021

Entity Type:

Limited Liability Company - CA

Formed In:

CALIFORNIA

Status:

Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of April 19, 2024.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 202170013

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.