

M24000009549

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

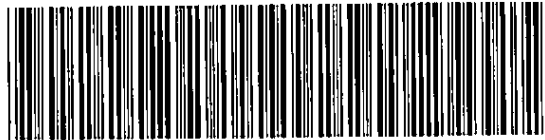
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

W24-106509

Office Use Only



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RECEIVED

2024 JUL 22 AM 9:59

CLERK OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

2024 JUL 22 PM 5:17

CLERK OF STATE
TALLAHASSEE, FLORIDA

JUL 25 2024

< Brumbley



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 23, 2024

SUNSHINE

CORRECTED
Please Allow For
Same File Date

SUBJECT: EL CAR WASH SAND LAKE EAST, LLC
Ref. Number: W24000106509

We have received your document for EL CAR WASH SAND LAKE EAST, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The money in your account is insufficient to cover the cost of filing this document. Please send additional money to cover this particular filing and other filings you wish to process.

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: 824A00016161

2024 JUL 25 AM 10:32
ALLAHASSEE, FLORIDA

OF 1/1/20

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 7/22/2024

****WALK IN****

ENTITY NAME EL CAR WASH SAND LAKE EAST, LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXXXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$155

ACCOUNT #: I20160000072

S. B. JAO

Please call Tina at the above number for any issues or concerns. Thank you so much!

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. El Car Wash Sand Lake East, 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.
(FEI number, if applicable)

4.
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0901 & 605.0905, F.S. to determine penalty liability)

5. 5201 SW 8th Street
(Street Address of Principal Office)

6. 5201 SW 8th Street
(Mailing Address)

Coral Gables, FL 33134

Coral Gables, FL 33134

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

Name: United Corporate Services, Inc.

Office Address: 3458 Lakeshore Drive

Tallahassee, Florida 32312
(City) (Zip code)

APPROVED
AND
FILED
2024 JUL 22 PM 5:17
TALLAHASSEE, FLORIDA
CLERK OF STATE

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.

Michael A Barr, President

(Registered agent's signature)

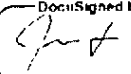
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>Justin Landau</u>	<input type="checkbox"/> Manager	Name: <u>Geoffrey Karas</u>
	<u>5201 SW 8th Street</u>		<u>5201 SW 8th Street</u>
<input type="checkbox"/> Member	Address: <u>Coral Gables, FL 33134</u>	<input type="checkbox"/> Member	Address: <u>Coral Gables, FL 33134</u>
<input type="checkbox"/> Authorized	<u></u>	<input type="checkbox"/> Authorized	<u></u>
Person	<u></u>	Person	<u></u>
<input checked="" type="checkbox"/> Other <u>Co-Chief Executive Officer</u>	<input type="checkbox"/> Other <u></u>	<input checked="" type="checkbox"/> Other <u>Co-Chief Executive Officer</u>	<input type="checkbox"/> Other <u></u>
<input type="checkbox"/> Manager	Name: <u>David Yassky</u>	<input type="checkbox"/> Manager	Name: <u>Geovanny Ortiz</u>
	<u>5201 SW 8th Street</u>		<u>5201 SW 8th Street</u>
<input type="checkbox"/> Member	Address: <u>Coral Gables, FL 33134</u>	<input type="checkbox"/> Member	Address: <u>Coral Gables, FL 33134</u>
<input type="checkbox"/> Authorized	<u></u>	<input type="checkbox"/> Authorized	<u></u>
Person	<u></u>	Person	<u></u>
<input checked="" type="checkbox"/> Other <u>Secretary</u>	<input type="checkbox"/> Other <u></u>	<input checked="" type="checkbox"/> Other <u>Treasurer</u>	<input type="checkbox"/> Other <u></u>
<input type="checkbox"/> Manager	Name: <u></u>	<input type="checkbox"/> Manager	Name: <u></u>
<input type="checkbox"/> Member	Address: <u></u>	<input type="checkbox"/> Member	Address: <u></u>
<input type="checkbox"/> Authorized	<u></u>	<input type="checkbox"/> Authorized	<u></u>
Person	<u></u>	Person	<u></u>
<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>	<input type="checkbox"/> Other <u></u>

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.

DocuSigned by:

 8BA79963680A41D
 Signature of an authorized person
 Justin Landau
 Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EL CAR WASH SAND LAKE EAST, 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 NINETEENTH DAY OF JULY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EL CAR WASH SAND LAKE EAST, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF JULY, A.D. 2024.

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



4306756 8300

SR# 20243189986

You may verify this certificate online at corp.delaware.gov/a-ithver.shtml

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203970820

Date: 07-19-24