# U24000009865

| (Requestor's Name)                      |  |  |  |  |  |
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| (City/State/Zip/Phone #)                |  |  |  |  |  |
| <u> </u>                                |  |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |  |
|   |  |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |  |
| (Basiness Entry Harrey                  |  |  |  |  |  |
|   |  |  |  |  |  |
| (Document Number)                       |  |  |  |  |  |
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| Certified Copies Certificates of Status |  |  |  |  |  |
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### **COVER LETTER**

TO:

| Division of Corporations   |   |  |
|--|---|--|
| Orange Coast Real Estate nd Finance LLC JECT:  |   |  |
|  | e of Limited Liability Company  |  |
|  | Company for Authorization to Transact Business in Florida," Certificat referenced foreign limited liability company to transact business in Flo |  |
| se return all correspondence concerning this matter to   | o the following:  |  |
| Francisco Morgan   |   |  |
|  | Name of Person  |  |
| Orange Coast Real Estate and Finance   | LLC   |  |
|  | Firm/Company  |  |
| 3569 Sagittarius Drive   |   |  |
|  | Address   |  |
| Las Vegas NV 89135   |   |  |
| C  | ity/State and Zip Code  |  |
| frank@orangecoastre.com  |   |  |
| E-mail address: (to be   | e used for future annual report notification)   |  |
| further information concerning this matter, please cal   | II:   |  |
| Francisco Morgan   | 949 205-0173<br>at ( )  |  |
| Name of Contact Person   | Area Code Daytime Telephone Number  |  |
| Mailing Address:   | Street Address:   |  |
| Registration Section   | Registration Section  |  |
| Division of Corporations   | Division of Corporations  |  |
| P.O. Box 6327<br>Tallahassee, FL 32314   | The Centre of Tallahassee 2415 N. Monroe Street, Suite 810  |  |
| Tananassee, PL 32314   | Tallahassee, FL 32303   |  |
| Enclosed is a check for the following amount:  | DADTMENT DE CTATE   |  |
| Please make check payable to: FLORIDA DEP  \$125.00 Filing Fee \$130.00 Filing Fee  Certificate of | e & 🔲 \$155.00 Filing Fee & 🗏 \$160.00 Filing Fee, Certificate  |  |

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

|  | ite and Finance LLC Limited Liability Company; must include "Limited   | 1:-1:  | ···                     |  |
|--|--|--|-------------------------|--|
| (Name of Foreign   | Limited Liability Company; must include "Limited   | Liability Company. (L.L.C., or "LEC.")                     |                         |  |
|  |  |  |                         |  |
| me umvailable, enter alternate r   | nime adopted for the purpose of transacting business in Flo  | rida. The alternate name must include "Limited Liability C | ompany," "L.L.C." or "L |  |
| rizona   |  | 87-2324900   |                         |  |
| (Jurisdiction under the law of which foreign limited liability company is organized) |  | 3. (FEI number, if ap)                                     | number, (Lapplicable)   |  |
|  |  |  |                         |  |
| 09/01/2024   |  |  |                         |  |
|  | (Date first transacted business in Florida, if prior to a<br>(See sections 605,0904 & 605,0905, F.S. to determin | egistration) ne penalty ljabiljty)                         |                         |  |
| 307 Mobile Ave Dayto   |  |  |                         |  |
| 507 MODIC AVE Dayto  |  | 6. (Mailing Address)                                       |                         |  |
| t Address of Principal Office)   |  | (Mailing Address)  |                         |  |
|  |  |  |                         |  |
|  |  |  |                         |  |
|  |  |  |                         |  |
|  |  |  |                         |  |
|  |  |  |                         |  |
|  |  |  |                         |  |
| Name and street addres   | ss of Florida registered agent: (P.O. Box  | NOT acceptable)  |                         |  |
| Name and <u>street addres</u>  | ss of Florida registered agent: (P.O. Box  | NOT acceptable)  | 2                       |  |
| Name and <u>street</u> addres  |  | NOT acceptable)  | , 57n <sub>7</sub> ,    |  |
| Name and <u>street addres</u><br>Name:   | ss of Florida registered agent: (P.O. Box Francisco Morgan   | NOT acceptable)  | (IP 5,707, 2017)        |  |
|  | Francisco Morgan   | NOT acceptable)  | 2 101F 5,7nz            |  |
|  |  |  |                         |  |
| Name:  | Francisco Morgan 307 Mobile Ave  |  | 26                      |  |
| Name:  | Francisco Morgan  307 Mobile Ave  Daytona Beach  | 32118<br>Florida   | 26 PH                   |  |
| Name:  | Francisco Morgan 307 Mobile Ave  | 32118  | 26                      |  |

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:                | Title or Capacit | <u>Y:</u>  | Name and Address: |
|--------------------|----------------------------------|------------------|------------|-------------------|
| ■Manager           | Name: Francisco Morgan           | □Manager         | Name:      |                   |
| □Member            | Address: 3569 Sagottarius Dr     | □Member          | Address:   |                   |
| □Authorized        | Las Vegas NV 89135               | □Authorized      |            | ·····             |
| Person             |                                  | Person           |            |                   |
| □Other             | Other                            | □Other           |            | Other             |
| □Manager           | Name: Martha I Velasco de Morgan | □Manager         | Name:      |                   |
| ■Member            | Address: 3569 Sagittarius Dr     | □Member          | Address: _ |                   |
| □Authorized        | Las Vegas NV 89135               | □Authorized      |            |                   |
| Person             |                                  | Person           |            |                   |
| □Other             | Other                            | □Other           |            | □Other            |
| □Manager           | Name: Stephanic Morgan           | □Manager         | Name:      |                   |
| ■Member            | Address: 3569 Sagittarius Dr     | □Member          | Address:   |                   |
| □Authorized        | Las Vegsa NV 89135               | □ 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.

Signature of an authorized person

Frabcisco Morgan

Typed or printed name of signee





# STATE OF ARIZONA



## Office of the CORPORATION COMMISSION

#### CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

### Orange Coast Real Estate And Finance LLC

ACC file number: 23152958

was incorporated under the laws of the State of Arizona on 11/19/2020, and that, according to the records of the Arizona Corporation Commission, said limited liability company is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.



18 WITNESS WHEREOF. Thave bereunto set my hand, affixed the official seal of the Arizonal Corporation Commission, and issued this Certificate on this date: 07/16/2024

Douglas R. Clark, Executive Director

Magle R.Clark



