## M240000 10202

(F	Requestor's Name)	<del></del>		
	Address)			
(i	Address)			
((	City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
(E	Business Entity Name)			
(0	Document Number)			
Certified Copies	Certificates of \$	Status		
Special Instructions to Filing Officer:				

Office Use Only

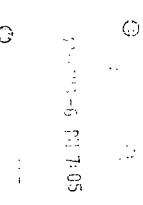


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## **COVER LETTER**

	Hadrat Linous 111C	
SUBJECT	Hedjet Linens, LLC	
	Nam	e of Limited Liability Company
		Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida
Please retur	rn all correspondence concerning this matter t	o the following:
	Thomas J. Hillegonds	
		Name of Person
	Cunningham Dalman, PC	
	N	Firm/Company
	321 Settlers Road	
		Address
	Holland, MI 49423	
		ity/State and Zip Code
	mageed1@sbcglobal.net	
	E-mail address: (to be	used for future annual report notification)
For further	information concerning this matter, please cal	II:
Tł	nomas J. Hillegonds	616 392-1821 at ( )
	Name of Contact Person	Area Code Daytime Telephone Number
<u>M</u> :	ailing Address:	Street Address:
Registration Section		Registration Section
·		Division of Corporations
	P.O. Box 6327 The Centre of Tallahassee	
Ta	Illahassee, FL 32314	2415 N. Monroe Street, Suite 810
		Tallahassee, FL 32303
	closed is a check for the following amount: ease make check payable to: FLORIDA DEP	

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

IN COMPILANCE 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 Flori	da. The alternate name must include "Limite	d Liability Company	v," "L. I., C," ar	-"t.i.c ")
Michigan		87-2354994			
2. (Jurisdiction under the law of which foreign limited hability company is organized)		3. (FEI m	umber, if applicable	1	_
January 1, 2024					
4	(Date first transacted business in Florida, if prior to reg (See sections 605 0904 & 605 0905; F.S. to determine	nstration ) penalty liability)			
10700 Northwest 36th	Avenue	10700 Northwest 36th Av			
5. (Street Address of Principal Office)		6. (Mailing Address)			_
Miami, FL 33167		Miami, FL 33167			
7 Nome and street address	os of Dogida movistored quante (D.O. Day )	NOT a agamtable)			
7. Name and <u>street addres</u> Name:	ss of Florida registered agent: (P.O. Box )  Registered Agents Inc.	NOT acceptable)	Ø.		¢
		NOT acceptable)		2.7	 
Name:	Registered Agents Inc.	33702		2 - Si. 2 - S	
Name:	Registered Agents Inc. 7901 4th St N STE 300			574 Ng -5 PH 7:	- G

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]:

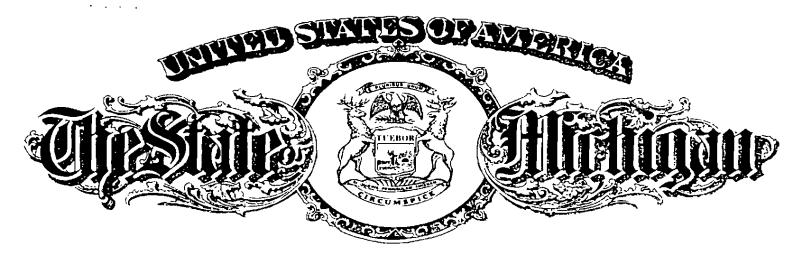
Title or Capacity:	Name and Address:	Title or Capacity:	
■Manager	Name: Aly Abdel Mageed	■Manager	Name: Hebatallah Mamdouh Mokhtar Mohamee
□Member	Address: 1205 Charleston Court	□Member	Address: 6 Ibrahim Helmy Street
□Authorized	Westmont, IL, 60559	□Authorized	Roushdy, El Ramleh
Person		Person	Alexandria, Egypt
□Other	□Other	□Other	Other
■Manager	Name: Mohamed Elnokali	□Manager	Name:
□Member	Address: 1916 Oak Shire Drive	□Member	Address:
□Authorized	Pearland, TX 77581	□Authorized	
Person		Person	
□Other		□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	- <u></u> -
□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.

8/1/2024
Signature of an authorized person

Aly Abdel Mageed, Its Manager



## Department of Licensing and Regulatory Affairs

Lansing, Michigan

This is to Certify That

HEDJET LINENS, LLC

was validly authorized on July 30, 2021, as a Michigan DOMESTIC LIMITED LIABILITY COMPANY and said limited liability company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23 to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by electronic transmission

Certificate Number: 24070182404

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 10th day of July, 2024.

Linda Clegg, Director

Linda Class

Corporations, Securities & Commercial Licensing Bureau

Verify this certificate at: URL to eCertificate Verification Search http://www.michigan.gov/corpverifycertificate.