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Florida Department of State
Division of Corporations
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((H24000283541 3)))



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Foreign Limited Liability Company
839 LANTANA, L.L.C.

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August 26, 2024

FLORIDA DEPARTMENT OF STATE
Division of Corporations

GASSMAN, CROTTY & RENICOLO, P.A.

SUBJECT: 839 LANTANA, L.L.C.
REF: W24000121130

Documented - Fax Electronically - Please include the following information and
refax the complete document, including the electronic filing cover sheet.

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.

Please return your document, along with a copy of this letter, within 60
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Tracy L Lemieux
Regulatory Specialist II

FAX Aud. #: H24000283541
FAX Number: 850-650-0000

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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. 839 LANTANA, L.L.C.
 (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. WYOMING
 (Jurisdiction under the law of which foreign limited liability company is organized)

3. 86-1915698
 (FEI number, if applicable)

4. 1245 COURT STREET
 (Date first transacted business in Florida, if prior to registration.)
 (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1245 COURT STREET
 (Street Address of Principal Office)

6. 1245 COURT STREET
 (Mailing Address)

CLEARWATER, FL 33756

CLEARWATER, FL 33756

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

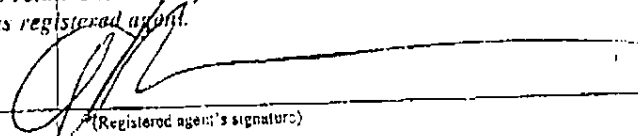
Name: ALAN S. GASSMAN, ESQ.

Office Address: 1245 COURT STREET

CLEARWATER 33756
 (City) , Florida (Zip code)

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.


 (Registered agent's signature)

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 DIVISION OF CORPORATIONS
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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:

☒ Manager Name: PETER RAND

☐ Member Address: 1245 COURT STREET

☐ Authorized CLEARWATER, FL 37756

Person

☐ Other ☐ Other

☐ Manager Name:

☐ Member Address:

☐ Authorized

Person

☐ Other ☐ Other

☐ Manager Name:

☐ Member Address:

☐ Authorized

Person

☐ Other ☐ Other

Title or Capacity: Name and Address:

☐ Manager Name:

☐ Member Address:

☐ Authorized

Person

☐ Other ☐ Other

☐ Manager Name:

☐ Member Address:

☐ Authorized

Person

☐ Other ☐ Other

☐ Manager Name:

☐ Member Address:

☐ Authorized

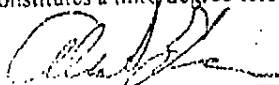
Person

☐ 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

ALAN S. GASSMAN, ESQ., AUTH. REP.

Typed or printed name of signer

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STATE OF WYOMING
Office of the Secretary of State

I, **CHUCK GRAY**, Secretary of State of the State of Wyoming, do hereby certify that according to the records of this office,

839 LANTANA, L.L.C.

is a

Limited Liability Company

formed or qualified under the laws of Wyoming did on **February 5, 2021**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2021-000978963**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 22nd day of August, 2024 at 12:10 PM. This certificate is assigned ID Number 075560320.



A handwritten signature in cursive script that reads 'Chuck Gray'.

Secretary of State