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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : JONES FOSTER P.A.
Account Number : 076077003231
Phone : (561)650-0471
Fax Number : (561)650-5300

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: JKservice@jonesfooster.com

Foreign Limited Liability Company
1620 S Congress Avenue LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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2024 SEP -3 PM 3:58

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DIVISION OF CORPORATIONS

2024 SEP -3 AM 10:42

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1620 S Congress Avenue LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following.

Jordan Johansen

Name of Person

Jones Foster P.A.

Firm/Company

505 S Flagler Drive, Suite 1100

Address

West Palm Beach, FL 33401

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jordan Johansen

at (561)

650-0432

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: FLORIDA DEPARTMENT OF STATE

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☒ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

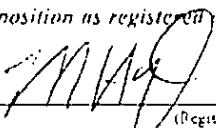
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDAIN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:1. 1620 S Congress Avenue LLC
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

2. Delaware
(Jurisdiction under the law of which foreign limited liability company is organized)3. 99-4161519
(FBI number, if applicable)4. _____
(Date first transacts business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)5. 7804 Cocobay Court
(Street Address of Principal Office)6. 7804 Cocobay Court
(Mailing Address)Naples, FL 34108Naples, FL 341087. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)Name: Jones Foster Service, LLCOffice Address: 505 South Flagler Drive, Suite 1100West Palm Beach, Florida 33401
(City) (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)
Mark H. Dahlmeier, Manager

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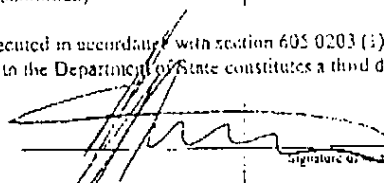
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☒ Manager	Name: <u>Innside Property Investments I Inc.</u>	☐ Manager	Name: <u>Gideon Trope</u>
☐ Member	Address: <u>7804 Cocobay Court</u>	☐ Member	Address: <u>7804 Cocobay Court</u>
☐ Authorized	<u>Naples, FL 34108</u>	☐ Authorized	<u>Naples, FL 34108</u>
Person	_____	Person	_____
☐ Other _____	☐ Other _____	☒ Other President	☐ Other _____
☐ Manager	Name: _____	☐ Manager	Name: _____
☐ Member	Address: _____	☐ Member	Address: _____
☐ Authorized	_____	☐ Authorized	_____
Person	_____	Person	_____
☐ Other _____	☐ Other _____	☐ Other _____	☐ Other _____
☐ Manager	Name: _____	☐ Manager	Name: _____
☐ Member	Address: _____	☐ Member	Address: _____
☐ Authorized	_____	☐ 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 provider 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 authorized person
 Gideon Trope, President

 Typed or printed name of signer

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Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "1620 S CONGRESS AVENUE 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 TWENTY-SEVENTH DAY OF AUGUST, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "1620 S CONGRESS AVENUE LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF JULY, A.D. 2024.

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



4355633 8300

SR# 20243526550

You may verify this certificate online at corp.delaware.gov/authver.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 in a small font.

Authentication: 204253162

Date: 08-27-24

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