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COVER LETTER

	/ashington Avenue, LLC				
ЈВЈЕСТ: _	Name	e of Limited Liability Company			
he enclosed " cistence, and	Application by Foreign Limited Liability C check are submitted to register the above i	Company for Authorization to Transact Business in Florida," Certific referenced foreign limited liability company to transact business in F			
ease return a	Il correspondence concerning this matter to	o the following:			
	Michael Hayes	^			
		Name of Person			
	Washington Avenue, LLC				
Firm/Company					
	23063 Wahoo Lane				
Address					
	Cudjoe Key, FL. 33042				
	C	Sity/State and Zip Code			
	miwelding@yahoo.com				
	E-mail address: (to be	e used for future annual report notification)			
or further info	ormation concerning this matter, please ca	il:			
Michael Hayes		781 760-7494			
	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			
Pleas	osed is a check for the following amount: e make check payable to: FLORIDA DEI 25.00 Filing Fee S130.00 Filing Fe Certificate	re & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certifica			

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

IN COMPLIANCE WITH SECTION 605.0602, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY

COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Washington Avenue, LLC (Name of Foreign Lamited Liability Company; must include "Limited Liability Company," "L.I.C.," or "LLC") Washington Avenue FL, 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.I. C," or "LLC") 61-1575908 (FEI number, (Capplicable) Jurischetion under the law of which foreign limited liability company is organized: (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0908, F.S. to determine penalty hability) 23063 Wahoo Lane 23063 Wahoo Lane 5. (Street Address of Principal Office) (Mailing Address) Cudjoe Key, FL Cudjoe Key, FL 33042 33042 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Michael Hayes Name: 23063 Wahoo Lane Office Address: Cudjoe Key

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)

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:	Name and Address:
■Manager	Name:	□Manager	Name: Debra Ferragamo-Hayes
□Member	Address:	■ Member	Address: 23063 Wahoo Lane
□Authorized	Cudjoe Key, FL. 33042	□Authorized	Cudjoe Key, FL. 33042
Person		Person	
□Other		Other	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. Nonindexed 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.

Michael Hayes

Exped or printed name of signer



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

Date: August 20, 2024

To Whom It May Concern:

Thereby certify that a certificate of organization of Limited Liability Company was filed in this office by

WASHINGTON AVENUE, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C, on February 05, 2009.

I further certify that said Limited Liability Company has not filed a certificate of cancellation; that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156C, § 70 for said Limited Liability Company's dissolution; and that, so far as appears of record, said Limited Liability Company has legal existence.



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Travin Galetin

Certificate Number: 24080317230

Verify this Certificate at: https://corp.sec.state.ma.us/corpweb/Certificates/Verify.aspx

Processed by: hng