

m24000012295

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

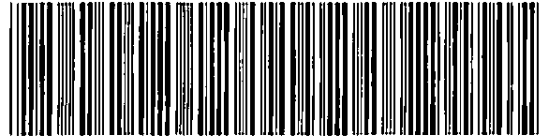
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W24-115368

Office Use Only



300434326133

09/17/24--01017--006 **1471.25

09/13/24--01007--016 **125.00

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AUG 12 2024

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
24 SEP 25 AM 11:48

MS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 16, 2024

ANTHONY YEZEK
9470 CORKSCREW PALMS CIR STE 201
ESTERO, FL 33928 US

SUBJECT: KOHVA LLC
Ref. Number: W24000115308

We have received your document for KOHVA LLC and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as or not distinguishable from the name of a voluntarily dissolved business entity. This name is not available for the assumption or use by another entity for 120 days after the effective date of the dissolution. The dissolved business entity may provide the Department of State with an affidavit or letter, releasing the name for use to you and affirming they have no intention of revoking the dissolution or you may adopt an alternate name for use in Florida. If you choose to adopt an alternate name, please enter that name in the space provided in number one of the application.

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$1471.25.

The registered agent must sign accepting the designation.

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.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Ariel Jones
Regulatory Specialist II

Letter Number: 224A00018250

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Kohva 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:

Anthony Yezek

Name of Person

Kohva LLC

Firm/Company

9470 Corkscrew Palms Cir Ste 201

Address

Estero, FL 33928

City/State and Zip Code

anthony@kohva.com

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

For further information concerning this matter, please call:

Anthony Yezek

309

397-7999

at (_____) _____

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

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. Kohva LLC
(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. Colorado 27-0540464
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 05/27/2017
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

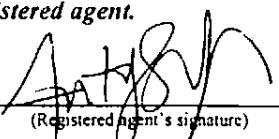
5. 9470 Corkscrew Palms Cir. 9470 Corkscrew Palms Cir.
(Street Address of Principal Office) (Mailing Address)
Ste 201 Ste 201
Esteros, FL 33928 Esteros, FL 33928

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

Name: Anthony Yezek
Office Address: 9470 Corkscrew Palms Cir. Ste 201
Esteros, FL 33928 33928
(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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SECRETARY OF STATE
DIVISION OF CORPORATIONS
24 SEP 25 AM 11:40

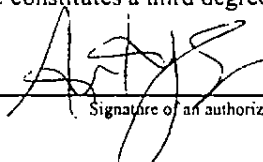
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>		<u>Name and Address:</u>		<u>Title or Capacity:</u>		<u>Name and Address:</u>	
<input checked="" type="checkbox"/> Manager	Name:	David Borden		<input checked="" type="checkbox"/> Manager	Name:	Jonathan Ewen	
<input type="checkbox"/> Member	Address:	9470 Corkscrew Palms Cir		<input type="checkbox"/> Member	Address:	9470 Corkscrew Palms Cir	
<input type="checkbox"/> Authorized		Ste 201		<input type="checkbox"/> Authorized		9470 Corkscrew Palms Cir	
Person		Estero, FL 33928		Person		9470 Corkscrew Palms Cir	
<input type="checkbox"/> Other			<input type="checkbox"/> Other	<input type="checkbox"/> Other			<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name:	ANTHONY YEZEK		<input type="checkbox"/> Manager	Name:		
<input checked="" type="checkbox"/> Member	Address:	9470 CORKSCREW PALMS		<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized		STE 201		<input type="checkbox"/> Authorized			
Person		ESTERO FL 33928		Person			
<input type="checkbox"/> Other			<input type="checkbox"/> Other	<input type="checkbox"/> Other			<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name:			<input type="checkbox"/> Manager	Name:		
<input type="checkbox"/> Member	Address:			<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized				<input type="checkbox"/> Authorized			
Person				Person			
<input type="checkbox"/> Other			<input type="checkbox"/> Other	<input type="checkbox"/> Other			<input type="checkbox"/> 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
Anthony Yezek

Typed or printed name of signee

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Kohva LLC

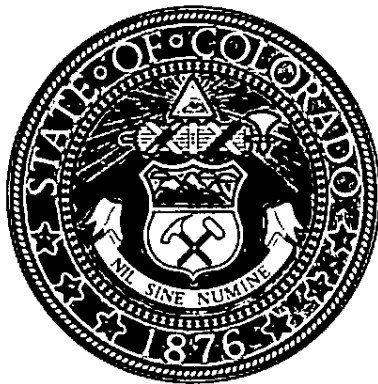
is a

Limited Liability Company

formed or registered on 07/14/2009 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20091373037.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 08/29/2024 that have been posted, and by documents delivered to this office electronically through 09/04/2024 @ 09:12:23.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 09/04/2024 @ 09:12:23 in accordance with applicable law. This certificate is assigned Confirmation Number 16355584.



Jena Griswold

Secretary of State of the State of Colorado

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's website is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's website, <https://www.coloradosos.gov/biz/CertificateSearchCriteria.do>, entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our website, <https://www.coloradosos.gov> click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."

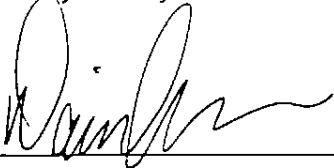
Registration Section
Division of Corporation
PO Box 6327
Tallahassee, FL 32314

August 20, 2024

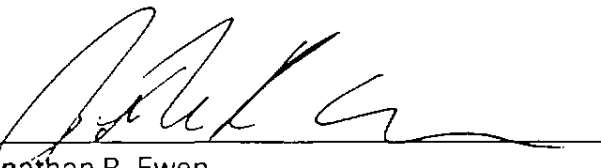
To Whom It May Concern:

We, the owners and members of the Florida LLC, Kohva LLC (Document # L1700017638), confirm that we do not intend to reopen the Kohva LLC entity in Florida, as we are registered as a Colorado entity. Please release the name to be used ahead of the 120-day waiting period. You may contact us at the information provided below with any questions or issues. Additionally, we submitted a foreign entity filing (Document # W24000115308), which was rejected due to the duplicate name. Please proceed with this filing so long as you see fit.

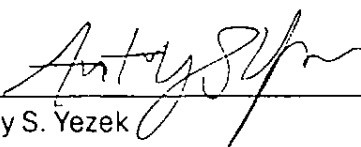
Thank you for your attention to this matter.



David J. Borden
9740 Corkscrew Palms Cir. STE 201
Estero, FL 33928
719-330-1649



Jonathan R. Ewen
9740 Corkscrew Palms Cir. STE 201
Estero, FL 33928
716-984-4987



Anthony S. Yezek
9740 Corkscrew Palms Cir. STE 201
Estero, FL 33928
309-397-7999

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