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FILED Oct 30, 2024 08:00 AM Secretary of State



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DATE: 10/30/2024

NAME: CANTATA WEALTH MANAGEMENT, LLC

TYPE OF FILING: APPLICATION

COST: 155.00

RETURN: Coffie COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

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#### COVER LETTER

TO:	<b>Registration Section</b>
	Division of Corporations

Cantata Wealth Management, LLC

SUBJECT:

t.

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:

Gregory Steven Cheng

Name of Person

Cantata Wealth Management, LLC

Firm/Company

2525 Ponce de Leon Blvd., Suite 300

Address

Coral Gables, Florida 33134

City/State and Zip Code

greg@cantatawealth.com

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

For further information concerning this matter, please call:

Jonathan Storper, Esq.	415 995-5040 at ( )
Name of Contact Person	Area Code Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32303

□ \$125.00 Filing Fee □ \$130.00 Filing Fee & ③ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy 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. Cantata Wealth Management, LLC

-	Limited Liability Company; must include "Limited		
	name adopted for the purpose of transacting business in Fl	orida, The	alternate name must include "Limited Liability Company," "LL,C," or "LLC.")
Delaware 2.		2	99-3156746
(Jurisdiction under the law of v	which foreign limited liability company is organized)	э.	(FEI number, if applicable)
4		,	· · · · · · · · · · · · · · · · · · ·
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determi	registration inc penalty	.) liabitity)
2525 Ponce de Leon Blvd. 5. [Street Address of Principal Office]		6.	2525 Ponce de Leon Blvd.
(Street Address of Principal Office)			(Mailing Address)
Suite 300			Suite 300
Coral Gables, Florida 33134			Coral Gables, Florida 33134
7. Name and street addre	ess of Florida registered agent: (P.O. Box	: <u>NOT</u> ;	acceptable)
			FILED
Name:	GKL Registered Agents, Inc.		Oct 30, 2024 08:00 AM
Office Address:	28089 Vanderbilt Dr. Suite 201		Secretary of State
	Bonita Springs	<u> </u>	 34134 . 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.

Sarina Lish (Registered agent's signature)

(City)

• • • •

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:	<u>Title or Capacity:</u>	Name and Address:
■Manager	Name: Gregory Steven Cheng	Manager	Name:
□Member	Address: 2525 Ponce de Leon Blvd.	[] Member	Address:
Authorized	Suite 300	□Authorized	Suite 300
Person	Coral Gables, Florida 33134	Person	Coral Gables, Florida 33134
□Other		Other	Other
⊡Manager	Name:	□ Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
DOther	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 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.

~	-Signed by:	
	Gregory Steven Chieng	
Signa	TLEE 14 BOF BURDENE Derson	

Gregory Steven Cheng

Typed or printed name of signee



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CANTATA WEALTH MANAGEMENT, 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 THIRTIETH DAY OF OCTOBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CANTATA WEALTH MANAGEMENT, LLC" WAS FORMED ON THE SIXTEENTH DAY OF MAY, A.D. 2024.

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



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Authentication: 204755468 Date: 10-30-24

Page 1

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SR# 20244081541 You may verify this certificate online at corp.delaware.gov/authver.shtml