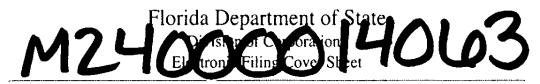
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000366204 3)))



H240003562043ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Fax Number

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

Email Address:_

Foreign Limited Liability Company Jasouto Winter Boat LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

2024 NOV -4 PM 12: 39
LECKE LANG OF STARS
LANGERS FLORE

APPROVED AND FILED

Electronic Filing Menu

Corporate Filing Menu

Help

KOV - 5 2024

K. Brumbley

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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

L. Jasouto Winter Boat LI					
(Name of Foreign	Limited Liability Company, must include "Limited	d Liability Company	:," "L.L.C.," or "LLC.")		
(If name unavailable, enter alternate)	name adopted for the purpose of transacting business in Fl	iorida. The alternate na	me must include "Limited Lia	bility Company," "L.L.C."	or "Lt.C.")
Delaware 2. Unswhetton under the law of w	hich foreign limited liability company is organized)	3	(FEI numbe	r, if applicable)	
4	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration.)			
5. (Street Address of Principal Office)		6	iling Address)		-
565 Marquesa Drive		565 Ma	rquesa Drive		
Coral Gables, FL 3315	6	Coral G	ables, FL 33156	·	
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptab	le)	2824 NOV - SECIRE A 121 CARAS	رود
Name:	Corporate Creations Network Inc.				FILE FILE
Office Address:	801 US Highway I			PM 12: 39 OF STATE EFT, F1 OPER	
	North Palm Beach		33408 Florida	25.5	
	(Crts.)		(Zin ende)		

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.

/s/ Joseph Panholzer	Joseph Panholzer, Special Secretary
(Registered ager	n'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: Jose Alberto Souto	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized	Coral Gables, FL 33156	□Authorized		
Person		Person		
Other	Other	Other	Oth	er
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
□Other	Other	□Other	D0th	er
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
□Other	Other	□Other	🗆 🗆 🗆 Oth	er

<u>Important Notice:</u> 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.

/s/ Joseph Panholzer
Signature of an authorized person
Joseph Panholzer, Attorney-in-Fact for Jose Alberto Souto, Manager
Typed or printed proper of signor

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "JASOUTO WINTER BOAT 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 FOURTH DAY OF NOVEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JASOUTO WINTER BOAT LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF JULY, A.D. 2020.

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

Authentication: 204784235

Date: 11-04-24