

Florida Department of State

Division of Corporations

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Division of Corporations  
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Foreign Limited Liability Company  
ENCORE-SCHOLAR WAY, LLC

Certificate of Status	0
Certified Copy	0
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K. SALY

DEC - 2 2024

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. ENCORE-SCHOLAR WAY, 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. South Carolina

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 88-2859041

(FEL number, if applicable)

4. November 25, 2024

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

5. 2 FELIX STREET

(Street Address of Principal Office)

CHARLESTON, SC 29403

6. 2 FELIX STREET

(Mailing Address)

CHARLESTON, SC 29403

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

Name: Chestnut Business Services, LLC

Office Address: 311 Park Place Blvd., Suit 300

Clearwater,

(City)

Florida 33759

(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)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

Manager

CULLEN HAWKINS

Manager

SPIRO COMITOS

2 FELIX STREET

2 FELIX STREET

CHARLESTON, SC 29403

CHARLESTON, SC 29403

(Use attachments if necessary)

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)

Nicholas J. Grimaudo

(Typed or printed name of signer)

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SECRETARY OF STATE

# *The State of South Carolina*



*Office of Secretary of State Mark Hammond*

## **Certificate of Existence**

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

ENCORE-SCHOLAR WAY, LLC, a limited liability company duly organized under the laws of the State of South Carolina on November 22nd, 2024, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal  
of the State of South Carolina this 26th day  
of November, 2024.

*Mark Hammond*  
Mark Hammond, Secretary of State

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