M24000014950

(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:					
·					
W24000144146					
. , , ,					

Office Use Only



400437481404

1000 20000 -010 00000

2024 KOV -8 FN 8: 21



October 23, 2024

KYLE J GELLIS 5155 CORPORATE WAY STE G JUPITER, FL 33458 US

SUBJECT: URBAN WOLF MANAGEMENT LLC

Ref. Number: W24000144146

We have received your document for URBAN WOLF MANAGEMENT LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(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.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Andrea Andrews Regulatory Specialist II

Letter Number: 624A00023345

RECEIVED

NOV 0 8 2024

and the second s

To the Department of State/Division of Corporations,

Urban Wolf Management LLC, a Florida Limited Liability Company (Florida Document Number L16000186230) am writing as per requested in your letter to Urban Wolf Management LLC, a Delaware Limited Liability Company for us to release our company name to them.

We, Urban Wolf Management LLC, a Florida Limited Liability Company, voluntarily dissolved our company in Florida on October 3rd, 2024, and have no intention of revoking the dissolution. Therefore we release the name to the applying foreign entity Urban Wolf Management LLC, a Delaware Limited Liability Company.

Regards,

Kyle J. Gellis Manager

Urban Wolf Management LLC

A Florida Limited Liability Company

COVER LETTER

	URBAN WOLF MANAGEMENT LLC	
SUBJEC	ne of Limited Liability Company	
	Nati	ie of Emilieu Claumity Company
		Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida.
Please re	eturn all correspondence concerning this matter	to the following:
	Kyle J Gellis	
		Name of Person
		
		Firm/Company
	5155 Corporate Way Ste G	
		Address
	Jupiter, FL 33458	
		City/State and Zip Code
	kg@urbanwolfllc.com	
	E-mail address: (to b	be used for future annual report notification)
For furth	ner information concerning this matter, please ca	all:
Kyle J. Gellis		561 366-7204 at ()
	Name of Contact Person	Area Code Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations		Street Address: Registration Section
		Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following amount: Please make check payable to: FLORIDA DE \$125.00 Filing Fee \$130.00 Filing Fe Certificate	ee & 🔳 \$155.00 Filing Fee & 🗌 \$160.00 Filing Fee, Certificate

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

IN COMPILANCE WITH SECTION 605.0002, FLORIDA STATUITS. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

name unavailable, enter alternate n	name adopted for the purpose of transacting business in Flo	orida. The alternate name must include "Limited Liabili	ty Company," "L 1. C," or "LL	
Delaware		81-4076915		
(Jurisdiction under the law of which foreign limited liability company is organized)		3(FEI number, i	[applicable]	
Lilaton				
10/4/24	(Date first transacted business in Florida, if prior to: (See sections 605,0904 & 605,0905, F.S. to determi	registration.) ine penalty liability)		
401 S County Rd #310	·	401 S County Rd #3105		
reet Address of Principal Office)		6(Mailing Address)		
Palm Beach, FL 33480		Palm Beach, FL 33480		
				
			202	
Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)	2024 NO	
Name and street address		: <u>NOT</u> acceptable)	2024 KOV –	
Name and street addres	ss of Florida registered agent: (P.O. Box Matthew Ramenda		2024 NOV -8	
	Matthew Ramenda		1	
	Matthew Ramenda		⇔	
Name:	Matthew Ramenda		-8 PII	

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 signiture)

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	<u> </u>	Name and Address:
■Manager	Name: Kyle J. Gellis	□Manager	Name:	
□Member	Address: 401 S County Rd #3105	□Member	Address:	
□Authorized	Palm Beach, FL 33480	□Authorized		
Person		Person		
□Other	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. 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

Kyle J. Gellis

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "URBAN WOLF 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 FIRST DAY OF NOVEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "URBAN WOLF

MANAGEMENT LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF AUGUST, A.D.

2024.



Authentication: 204782851

Date: 11-01-24