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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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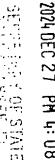


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COVER LETTER

Registration Section Division of Corporations

TO:

Name	of Limited Liability Company
	Company for Authorization to Transact Business in Florida," Certificate of eferenced foreign limited liability company to transact business in Florida,
Please return all correspondence concerning this matter to	the following:
	Ahlian Morris
	Name of Person
Sta	ar Family Markets
	Firm/Company
4604 4	19th Street N 1019
	Address
Saint Pete	ersburg Florida 33709
Ci	ty/State and Zip Code
	©StarFamilyMarkets.com used for future annual report notification)
For further information concerning this matter, please call	· · · · · · · · · · · · · · · · · · ·
Ahlian Morris	
	at (727)632-3443
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
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPA	ADTMENT OF STATE
S \$125.00 Filing Fee ☐ \$130.00 Filing Fee	& 🗆 \$155.00 Filing Fee & 🗔 \$160.00 Filing Fee, Certificate

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: Star Family Markets 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 Limited Limite **NEW MEXICO** (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5 4604 49th Street N 1019 St Petersburg FL 33709 6 4604 49th Street N 1019 St Petersburg FL 33709 (Street Address of Principal Office) (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Registered Agents Inc. Name: 7901 4th St N STE 300 Office Address: St. Petersburg. , Florida 33702 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 eignature)

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: Name: Ahlian Morris Name: Star Legacy LLC Trust □Manager ☐ Manager Address: 9737 Jefferson Parkway Member Address: 4604 49th ST N ☐ Member 1019 STE 1265 St Petersburg FL 33709 Apt C3 Englewood CO 80112 ☐ Authorized **⊠**Authorized Person Person Other____ Other Other____ ☐ Other □Manager ☐Manager Name: Name: _____ ☐ Member Address: Address: ☐ Member ☐ 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. Nonindexed 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.

Ahlian Morris

Typed or printed name of signee



Certificate of Good Standing and Compliance

IT IS HEREBY CERTIFIED THAT:

Star Family Markets LLC 7735910

the above named entity, a Company organized under the laws of New Mexico, is duly authorized to transact business in New Mexico as a Domestic Limited Liability Company, under the

Limited Liability Company Act

53-19-1 to 53-19-74 NMSA 1978

having filed its Articles of Organization on July 2, 2024, and Certificate of Organization issued as of said date.

It is further certified that the fees due to the Office of the Secretary of State which have been assessed against the above named entity have been paid to date and the entity is in good standing and duly authorized to transact business as its existence has not been revoked in New Mexico. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.

Certificate Issued: October 8, 2024

In testimony whereof, the Office of the Secretary of State has caused this certificate to be signed on this day in the City of Santa Fe, and the seal of said office to be affixed hereto.

SEAL OF THE SEAL O

Maggie Toulouse Oliver
Secretary of State

Certificate Validation #: 0100767

A certificate issued electronically from the New Mexico Secretary of State's office is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Validation option on the Business Filing System at https://portal.sos.state.nm.us/bfs/online and following the instructions displayed under Certificate Validation.



October 8, 2024

Business ID #: 7735910

Entity Name: Star Family Markets LLC

Filing History

Instrument Number:

7735910

Filed Date:

07/02/2024

Instrument Type:

Business Formation

Instrument Text: