# M25000001077

(Requestor's Name)
(Address)
(1001000)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
1.25-6150

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K. Brumbley



January 14, 2025

CSC

SUBJECT: CALTOPIA II, LLC Ref. Number: W25000006150

RESUBMIT
Please give original

Please give original submission date as file date.

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

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

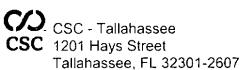
The document number of the name conflict is L24000528545.

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.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

Letter Number: 725A00000962



850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext: x62969 Date: 01/13/25 Order #: 1762521-3 Re: Caltopia li, LLC

Processing Method: Routine

#### TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$160.00 - FL State Account Number:

120000000195

Certificate of Good Standing from State of Incorporation

Please take the following action:

File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

#### COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJEC	CALTOPIA II, LLC	
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Limited Liability Company
		mpany for Authorization to Transact Business in Florida," Certificate of erenced foreign limited liability company to transact business in Florida.
Please re	eturn all correspondence concerning this matter to the	ne following:
	Jose J. Leonardo, Esq.	
		Name of Person
	Law Offices of Jose J. Leonardo, Esq	
	-	Firm/Company
	500 S. Dixie Highway, Suite 204	
		Address
	Coral Gables, FL 33146	
	City	State and Zip Code
	jose.leonardo@jleonardolaw.com	
	E-mail address: (to be us	ed for future annual report notification)
For furth	ner information concerning this matter, please call:	
	Jose Leonardo	305 275-9177
	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 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DEPAH  \$125.00 Filing Fee  \$130.00 Filing Fee & Certificate of S	S155,00 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:

f'name unavailable, enter alternate r	name adopted for the purpose of transacting business in Flo	orida. The alternate	name must include "Limited Lia	bility Company,"	"L.L.C," (	ar "LLC."	
Delaware			2773869				
(Jurisdiction under the law of which foreign limited liability company is organized)			3. (FEI number, (f applicable)				
·	thus first trans reted business in Florida. If print to.	enistration )					
	(Date first transacted business in Florida, if prior to i (See sections 605,0904 & 605,0905, F.S. to determine	ne penalty liability	)				
3121 Ponce de Leon Blvd.		3121 6					
treet Address of Principal Office)			Mailing Address)				
Coral Gables, FL 33	Sables, FL 33134 Coral Gables, FL 33134						
					_	_	
					2025	_	
. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT accept	able)		825 JAN	<del></del>	
N	Corporation Service Company				<u>.</u>	JLED	
Name: Office Address:	1201 Hays Street		-	교 명기 왕기	AM 10: 1,5		
Office Address.	Tallahassee		- 32301	··.:	ş		
(City)			Florida(Zip code)	<u></u>			

(Registered agent's signature)

and accept the obligations of my position as registered agent.

Corporation Service Company

By:

. Gaetano Caltagirone	Title or Capacit	<u>v:</u>	Name and Address:
Name:	□Manager	Name:	
Address: 3121 Ponce de Leon Blvd.	□Member	Address:	
Coral Gables, FL 33134	□Authorized		
	Person		-**
Other	□Other		□Other
Name:	□Manager	Name:	
Address:	□Member	Address:	
	□Authorized	<del></del>	
	Person		
□Other	□Other		□Other
Name:	□Manager	Name:	
Address:	□Member	Address:	
	□Authorized		
	Person		
Other	□Other		Other
	Name:	Person  Other	Person    Other

Typed or printed name of signee

CSC QUAL-56262

Page 1



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

DELAWARE, DO HEREBY CERTIFY "CALTOPIA II, 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 TENTH DAY OF JANUARY, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CALTOPIA II,
LLC" WAS FORMED ON THE THIRD DAY OF JANUARY, A.D. 2025.

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

Authentication: 202667060

Date: 01-10-25

10055870 8300 SR# 20250093745 Prepared by: Jose J. Leonardo, Esq. 500 S. Dixie Highway, Suite 204 Coral Gables, FL 33146

### AFFIDAVIT OF RELEASE OF CORPORATE NAME

BEFORE ME, the undersigned authority, personally appeared Jose J. Leonardo, who after being by me first duly sworn, deposes and says as follows:

- 1. On December 23, 2024, I personally filed by electronic means a limited liability company in Florida under the name of Caltopia II, LLC (the "Company") under document #L24000528545. I am the Registered Agent for the Company. The Company was dissolved on January 17, 2025.
- 2. The Company was filed in Florida by mistake as it was required to be filed in Delaware to comply with the lender's requirement in connection with a Construction Loan.
- 3. On January 14, 2025, the Florida Department of State, Division of Corporations, rejected a filing by my client of an Authorization to do Business in Florida, filed by CSC for the Delaware LLC, which is also named Caltopia II, LLC, under reference No.: <u>W25000006148</u>.
- 4. Caltopia II, LLC, a dissolved Florida limited liability company hereby releases the name of Caltopia II, LLC, in Florida and authorizes Caltopia II, LLC, a Delaware limited liability company to register to do business in Florida under the name of Caltopia II, LLC.
- 5. Affiant further states that he is familiar with the nature of this oath and with the penalties by law for falsely swearing to statements made in an instrument of this nature; that under the penalties of perjury, the above statements are true and correct.

6. This Affidavit is given as an inducement for the Florida Department of State,
Division of Corporations, to accept the filing of an authorization to do business in Florida by
Caltopia II, LLC, a Delaware limited liability company.
FURTHER AFFIANT SAYETH NAUGHT.    au
STATE OF FLORIDA ) )SS: COUNTY OF MIAMI-DADE )
The foregoing instrument was sworn to and subscribed before me by means of physical presence or online notarization, this 17th day of January, 2025, by Jose J. Leonardo, who is personally known to me or who has produced as identification.  NOTARY PUBLIC, State of Florida at Large
(SEAL)  (Print Name)  My Commission expires:  My Commission expires:  My Commission  My Commission  My Commission  My Commission  My Commission  My Commission  Exp. 4/17/2026