## 1087

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## Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

OCUMENT NUMBER	
**PLEASE FIL	LE THE ATTACHED AND RETURN**
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**PLEASE OBTAIN T	THE FOLLOWING FOR THE ABOVE ENTITY**
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Certificate of Stat	tus Reflecting:
**APOSTILLE	E' / NOTARIAL CERTIFICATION**
OUNTRY OF DESTINATION	
UMBER OF CERTIFICATES REQUESTED_	

## 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 COMPANYTY) TRANSACT BUSINESS IN THE STATE OF FLORIDA:

I. El Car Wash Garden, Ll	LC				-
(Name of Foreign I	imited Liability Company; must include "Limit	ed Liability Compa	ny," "E.E.C.," or "ELC. )		
(If name unavailable, enter alternate na	me adopted for the purpose of transacting business in Fl	orida. The alternate na	me must include "Limited Liability (	Company," "L.L.C," or "Ll.	)
Delaware 2		3	(FEI number, if		_
(Jurisdiction under the law of wh	ich foreign limited liability company is organized)	_	(FEI number, if	applicable)	
4				_	
	(Date first transacted business in Florida, if pnor to (See sections 605 0904 & 605,0905, F.S. to determ	n registration.) nine penalty liability)			
5201 SW 8th Street 5. (Street Address of Principal Office)			SW 8th Street (Mailing Address)		_
(Street Address of P	rincipal Office)		(Mailing Address)		
Coral Gables, FL 33134		Coral	Gables, FL 33134		_
				207	
7. Name and street address	s of Florida registered agent: (P.O. Bo	x <u>NOT</u> accepta	able)	5 JAN 24	- E2
Name:	United Corporate Services, Inc.		-	AH II: 59	m D
Office Address:	3458 Lakeshore Drive		-	. 59	
	Tallahassee	<u> </u>	32312 _, Florida		
	(City)		(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.

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: Name and Address: Title or Capacity: Name: Geoffrey Karas Justin Landau □Manager Name: □ Manager 5201 SW 8th Street 5201 SW 8th Street Address: \_\_ Coral Gables, FL 33134 Address: Coral Gables, FL 33134 ☐ Member □Mcmbcr □ Authorized □ Authorized Person Person Other MOther Co-Chief Executive Officer Other Co-Chief Executive Officer Other \_\_\_\_\_ Name: \_\_\_ Geovanny Ortiz Name: \_\_\_\_David Yassky ☐ Manager 5201 SW 8th Street 5201 SW 8th Street Address: \_\_\_Coral Gables, FL 33134\_ ☐ Member Address: Coral Gables, FL 33134 □Member □ Authorized ☐ Authorized Person Person □Other \_\_\_\_\_ MOther Treasurer □Other\_\_\_\_\_ MOther Secretary Name: \_\_\_\_\_\_ Name: \_\_\_\_\_ □Manager Address: Member Address: □ Member □ 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. Signature of an authorized person Justin Landau

Typed or printed name of signee

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## Delaware The First State

I, KRISTOPHER E. KNIGHT, ACTING SECRETARY OF STATE OF THE STATE
OF DELAWARE, DO HEREBY CERTIFY "EL CAR WASH GARDEN, 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 TWENTY-SECOND DAY OF JANUARY, A.D. 2025.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EL CAR WASH

GARDEN, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF JANUARY, A.D.

2025.

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

Kristopher E. Knight, Acting Secretary of State
Authentication: 202752081

Date: 01-22-25