

MZ50000000028

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

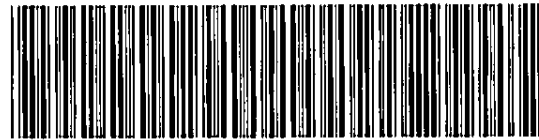
(Business Entity Name)

(Document Number)

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APR 26 2025

K. Brumley

CT CORP
(850) 656- 4724
3458 lakesore Drive
Tallahassee, FL 32312

Date: 04/25/2025

Acc#I20160000072

en: c DW

Name:	SMARFund, LLC
Document #:	
Order #:	16282027

Certified Copy of Arts & Amend:	☐		
Plain Copy:	☐		
Certificate of Good Standing:	☐		
Certified Copy of	☐		
Apostille/Notarial Certification:	☐	Country of Destination:	
		Number of Certs:	

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Amount: \$ 155.00

Thank you!

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SMARFund, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Dayvana Soto Milano

Name of Person

Firm/Company

3350 SW 148th Ave

Address

Miramar, FL 33027

City/State and Zip Code

smarqozblc@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marcello Zaffaroni

954

303-6419

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
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 DEPARTMENT OF STATE**

☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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. SMARFund, 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. Delaware

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

33-4188268

3.

(FEI number, if applicable)

4.

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

3350 SW 148th Ave

5. (Street Address of Principal Office)

Miramar, FL 33027

3350 SW 148th Ave

6.

(Mailing Address)

Miramar, FL 33027

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

Name:

Dayvana Soto Milano

Office Address:

3350 SW 148th Ave

Miramar

(City)

, Florida

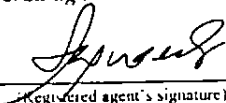
33027

(Zip code)

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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)

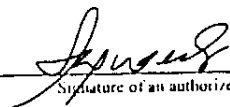
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☒ Manager	Name: Dayvana Soto Milano	☐ Manager	Name: R2J Revocable Trust
☐ Member	Address: 3350 SW 148th Ave	☒ Member	Address: 3046 Lake Ridge Lane
☐ Authorized	Miramar, FL 33027	☐ Authorized	Weston, FL 33332
Person		Person	
☐ Other	☐ Other	☐ Other	☐ Other
☐ Manager	Name: DSV Revocable Trust	☐ Manager	Name:
☒ Member	Address: 3046 Lake Ridge Lane	☐ Member	Address:
☐ Authorized	Weston, FL 33332	☐ 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
Dayvana Soto Milano

Typed or printed name of signer

Delaware

The First State

Page 1

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SMARFUND, 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-FIFTH DAY OF APRIL, A.D. 2025.

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



10127254 8300

SR# 20251793244

You may verify this certificate online at corp.delaware.gov/authver.shtml

C. P. Sanchez

Charuni Patibanda-Sanchez, Secretary of State

Authentication: 203535360

Date: 04-25-25