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(((H23000110412 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

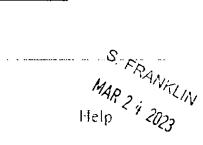
\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: karamb@sullcrom.com

## Foreign Limited Liability Company DEEP VEE LLC

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu



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

IN COMPLANCE WITH SECTION 605 0902, FLORIDA STATUTEN THE FOLLOWING IS SUBMITTED TO REGISTER A FOREGIN TRAITED HABILITY COMPANY TO TRAINSACT BUNINESS IN THE STATE OF FLORIDA:

name enavastable, enter alternate nam	ititied Lightity Company; must include "Limi ie adapted for the purpose of transacting business in h foreign limited liability company is organized,	landa. He alternate name must metude	
Delaware			
Delaware			
	h foreign limited liability company is organized,	3	(Fill number (Capplicable)
Turisdiction under the law of which	h fercigo limited liability company is organized,	·	(Fill number (Lapplicable)
			3° /
			<u> </u>
	(flate fire thousante l'business in Florida at prior t (See sessions 695 (904 & 605 0905, F.S. to deter	s registration ;	\ \
	(See sections 60) (904 & 603 0905, F.S. to deter	nine penalty liability	<i>! [</i> :
Kochman & Ziska PLC		c/o Maura Ziska	• 1
cet Address of Principal Office)	<del></del>	6Mailine Address)	
222 Lakeview Avenue		22211	$f_{\mathbb{C}}$ ,
222 Lakeview Avenue		222 Lakeview Ave	mie
West Palm Beach, FL 33-	each, FL 33401 West Palm Beach, FL 33401		FL 33401
	<del></del>		
Name and street address.	of Florida (egistered agent - (P.O. Bo	v. MOT an amendal at	- 1
same and street address t	or Frontia registered agent (1.0), no	( . <u>NOT</u> acceptable)	^>
			သိ
	CT Corporation System		<del></del> .
Name.		<u> </u>	•
	200 South Pine Island Road		· ;;
Office Address:			, , , , , , , , , , , , , , , , , , ,
ŗ	Plantation	11	324
	Tantation .	, Florida	

### 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. F	For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or person	is authorized to
	age [up to six (5) total]	

Title or Capacity:	Name and Address:	Title or Capacit	<u>ly:</u>	Name and Address:
_Manager	Name, Bachir P. Karam	_ Manager	Name,	
□Member	Address: 125 Broad Street	□Member		ω· 
■ Authorized	Ste. 3911	☐ Authorized		i.
Person	New York, NY 10004	Person		Č.
Other	Other	□Other		_Other
□Manager	Name:	□ Manager	Name	
I Member	Address:	□Member	Address:	
Authorized		Authorized		<u></u>
Person		Person		1 1
□ Other	Other	]Other		□ Other □
□ Manager	Name:	□Manager	Name:	
T.Member	Address:	-Member	Address:	
Nuthorized		□ Authorized		
Person		Person		
-()ther	— Other	Touber		()ther

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)
- 40. 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 \$ 817,155, F.S.

Signature of an authorized person		
Bachir P. Karam,	Authorized Person	

# Delaware The First State

Page 1

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

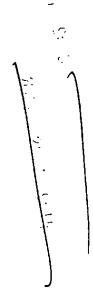
DELAWARE, DO HEREBY CERTIFY "DEEP VEE LLC" IS DULY FORMED UNDER THE

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 SIXTH DAY OF MARCH, A.D. 2023.

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





Authentication: 202842721

Date: 03-06-23