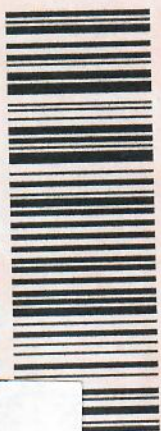


EXHIBIT L

CERTIFIED MAIL™



7011 2000 0002 2479 2193



ATHERINE FERNANDEZ KUNDLE

State Attorney

E.R. Graham Building

1350 Northwest 12th Avenue

Miami, Florida 33136-2111

Royal Palm P&DC 330

THU 24 JUN 2021

Blue Accorn LLC
145 Williman St
Charleston SC 39403

IN THE CIRCUIT COURT OF THE ELEVENTH JUDICIAL CIRCUIT
IN AND FOR MIAMI-DADE COUNTY, FLORIDA
SUBPOENA DUCES TECUM-INVESTIGATION

INVESTIGATION NUMBER: PD210503138923

REQUISITION NUMBER: DPR2105942

STATE OF FLORIDA V. In Re: INVESTIGATION

TO ALL AND SINGULAR THE SHERIFFS OF THE STATE OF FLORIDA:

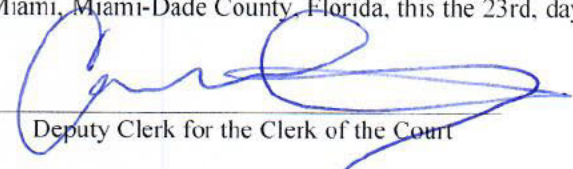
We command you to summon, **Blue Accorn LLC, 145 Williman St Charleston, SC, 29403-3112** to be and appear before the State Attorney of the Eleventh Judicial Circuit of Florida, located at the E.R. Graham Building, 1350 Northwest 12th Avenue, Miami, Florida, 33136 1st Floor, Reception Area, **(please bring a photo I.D.)** on Monday, the 12th, day of July 2021, at 10:00am, (see KHALIL MADANI, Assistant State Attorney, phone: (305) 547-4025), to bring with him (her or them) and produce for inspection the following: **any and all records related to [REDACTED] address [REDACTED] [REDACTED] which the lender is Capital Plus Financial LLC**. In lieu of appearance, please attach a copy of this subpoena along with the completed certification of business records to the records and mail them to the attention of: Assistant State Attorney, **Khalil Madani**, at **1350 N.W. 12 Avenue, Miami, FL 33136**. If preferred, the records can be emailed to: DanielaGonzalezvarona@miamisao.com

YOU ARE SPECIFICALLY REQUESTED NOT TO DISCLOSE THE EXISTENCE OF THIS REQUEST. ANY SUCH DISCLOSURE COULD IMPEDE THE INVESTIGATION BEING CONDUCTED AND THEREBY INTERFERE WITH THE ENFORCEMENT OF THE LAW.

Persons with a disability who require reasonable accommodations should call the number listed above, or for the hearing impaired call 1-800-955-8771 (Florida Relay Service).

And this you shall in no wise omit.

WITNESS, the Clerk of said Court, and the seal of said Court at Miami, Miami-Dade County, Florida, this the 23rd, day of June, 2021.

By: 

Deputy Clerk for the Clerk of the Court

RECEIVED this Subpoena on this the _____ day of _____, 2021, and executed the same on the _____ day of _____, 2021, by delivering a true copy thereof to the witness named above, as follows, to wit:

SHERIFF, MIAMI-DADE COUNTY FLORIDA

By:

☐ Deputy Sheriff

☐ State Attorney Investigator



WITNESS INSTRUCTIONS: PLEASE BRING THIS NOTIFICATION WITH YOU

BILLING INSTRUCTIONS: You must attach a copy of this subpoena to your invoice, include your Federal ID Number and Requisition Number on the invoice and send to the above-listed Assistant State Attorney at the address listed. Invoices received without a subpoena, Requisition Number, and Federal Employer ID Number will be returned unpaid.

If the cost of supplying these records exceeds \$300.00, you must contact the State Attorney's Office Fiscal Division at (305)547-0557, for authorization before proceeding.

ASA initials

LT



STATE ATTORNEY

ELEVENTH JUDICIAL CIRCUIT OF FLORIDA
E. R. GRAHAM BUILDING
1350 N.W. 12TH AVENUE
MIAMI, FLORIDA 33136-2111

KATHERINE FERNANDEZ RUNDLE
STATE ATTORNEY

TELEPHONE (305) 547-0100
www.miamiSAO.com

June 23, 2021

Re: State v. In Re: INVESTIGATION
Investigation No: PD210503138923

NOTICE REGARDING FEES **FOR RECORDS PRODUCTION BY A DISINTERESTED WITNESS**

Pursuant to Florida Statute 92.153(2)(a), "In any proceeding, a disinterested witness shall be paid for any costs the witness reasonably incurs either directly or indirectly in producing, searching for, reproducing, or transporting documents pursuant to a summons [subpoena];

however, the cost of documents produced pursuant to a subpoena or records request by a state attorney or public defender **may not exceed 15 cents per page and \$10 per hour for research or retrieval.**"

Note: If the cost of supplying these records exceeds \$300.00, please contact the State Attorney's Office Fiscal Division (305) 547-0557, before proceeding.

After the subpoena is served, you should keep an accurate record of personnel search time and the number of reproductions made. When the subpoena has been satisfactorily complied with, you may submit an itemized invoice per the instructions on the subpoena.

You must include the following on your invoice:

1. Investigation Number
2. Requisition Number
3. Your Federal Employer's Identification Number

**THIS NOTICE REGARDING FEES SUPERSEDES ANY
AND ALL PREVIOUSLY PUBLISHED FEE NOTICES**



STATE ATTORNEY

ELEVENTH JUDICIAL CIRCUIT OF FLORIDA
E. R. GRAHAM BUILDING
1350 N.W. 12TH AVENUE
MIAMI, FLORIDA 33136-2111

KATHERINE FERNANDEZ RUNDLE
STATE ATTORNEY

TELEPHONE (305) 547-0100
www.miamiSAO.com

June 23, 2021

Re: Certification of Subpoenaed Records

Dear Custodian of Records:

As you may be aware, on some occasions the production of business records by a records custodian of a corporation is followed by the necessity of live testimony at trial or hearing by that same records custodian or another designated records custodian. The live testimony is sometimes required by law to enter the subpoenaed documents into evidence.

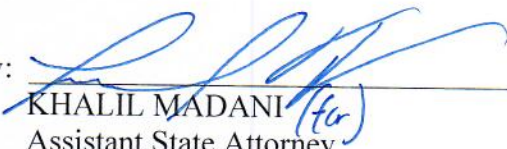
Recent changes to Florida law allow some business records to be admitted into evidence without the need for live testimony when the records are provided along with a certification, such as the one attached hereto. When permitted, therefore, these certifications could avoid the need for live testimony by a custodian of records at a trial or hearing.

In an effort to move the requested records into evidence without the need for live testimony, please complete the attached "Certification," if true and accurate, and return it along with the requested records. If you have any questions regarding the form or about the subpoena, please contact me. Thank you for your anticipated cooperation.

Sincerely,

KATHERINE FERNANDEZ RUNDLE
State Attorney

By:


KHALIL MADANI (for)
Assistant State Attorney

CERTIFICATION OF CUSTODIAN OF RECORDS OF REGULARLY CONDUCTED BUSINESS ACTIVITIES

Pursuant to Fla. Stat. §90.803(6)(a) & (c), § 90.902(11), § 92.60(2), and/or § 92.605(5)

The undersigned declarant hereby declares, certifies, verifies or states the following:

I, _____, am a duly authorized officer and/or custodian of
records for _____ with authority to execute this
affidavit and to certify to the authenticity and accuracy of the records of regularly conducted business
activities which are the subject of this certification.

The records produced herewith, and described below, are original documents or are true copies of
records of a regularly conducted business activity that:

- a) Were made at or near the time of the occurrence of the matters set forth by, or from the
information transmitted by, a person having knowledge of those matters;
- b) Were kept in the course of the regularly conducted business activity; and
- c) Were made as a regular practice in the course of the regularly conducted business activity.

The total number of pages produced are (_____). The records provided are described and identified as
follows (please enter any internal reference number or identification information and/or description below):

I declare under the penalty of perjury of the state or country in which this certification is made that
the foregoing is true and correct.

Date

Signature of Affiant/Declarant

Before me, the undersigned authority, personally appeared _____,
Print Name

who, being by me first duly sworn deposes and says that this certification is true and correct. The
foregoing instrument was acknowledged under oath before me, by means of ☐ physical presence or ☐
online notarization, on this _____ day of _____, 20____, by the individual
whose name and signature appear above, and who _____ is personally known to me, or who
produced the following identification (ID Type) _____ and (Number)
_____.

Signature of Notary Public in and for

State of _____

City/County of _____