



GALBUT WALTERS & ASSOCIATES

April 30, 2020

Division of Corporations
Registration Section
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: Registration of Delaware LLCs to Transact Business
L & W ALF, LLC
15520 NW 2ND AVE, LLC
ASA OPCO MANAGEMENT, LLC

Dear Sir or Madam:

Enclosed please find three completed Applications by Foreign Limited Liability Company For Authorization To Transact Business in Florida, on behalf of L & W ALF, LLC, a Delaware limited liability company, 15520 NW 2ND AVE, LLC, a Delaware limited liability company, and ASA OPCO MANAGEMENT, LLC, a Delaware limited liability company. I have also enclosed a certified copy of the Delaware Certificate of Formation, and Delaware Letter of Good Standing for each company, and our checks for your fees in the amount of \$160.00 per company.

Your assistance in completing this registration is greatly appreciated, including the return of our certified documents in the enclosed Federal Express envelope.

Please contact me should there be anything further that you require.

Sincerely yours,
GALBUT, WALTERS & ASSOCIATES, LLP

ALAN S. WALTERS, ESQ.

ASW:aw
Encl.

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. L & W ALF, 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)
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)

5. 4770 Biscayne Blvd., Ste 1400 (Street Address of Principal Office)
Miami, Florida 33137
6. 4770 Biscayne Blvd., Ste 1400 (Mailing Address)
Miami, Florida 33137

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

Name: Alan S. Walters
Office Address: 4770 Biscayne Blvd., Ste 1400
Miami, Florida 33137
(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.

Alan S. Walters
(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]:

Title or Capacity: Manager **Name and Address:**
 Name: Steven Bicky
 Address: 2745 N.E. 184th Way
Aventura, Florida 33160
 Person _____
 Other _____ Other _____

Title or Capacity: Manager **Name and Address:**
 Name: Aryeh Seskin
 Address: 4101 Pine Tree Drive, Apt. 731
Miami Beach, Fl. 33140
 Person _____
 Other _____ Other _____

Manager **Name:** Abraham A. Galbut
 Member **Address:** 4770 Biscayne Blvd, Ste 1400
Miami, Florida 33137
 Person _____
 Other _____ Other _____

Manager **Name:** _____
 Member **Address:** _____
 Authorized _____
 Person _____
 Other _____ Other _____

Manager **Name:** Alan S. Walters
 Member **Address:** 4770 Biscayne Blvd., Ste 1400
 Authorized Miami, Florida 33137
 Person _____
 Other _____ Other _____

Manager **Name:** _____
 Member **Address:** _____
 Authorized _____
 Person _____
 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

Alan S. Walters

Typed or printed name of signer

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "L & W ALF, 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-NINTH DAY OF APRIL, A.D. 2020.

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Jeffrey W. Bullock, Secretary of State

Authentication: 202845342