

M20000002127

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

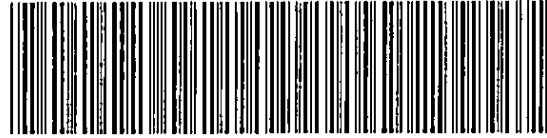
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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K. SALY
FEB 23 2020

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 186412 4327683

AUTHORIZATION :

COST LIMIT : \$ 130.00

ORDER DATE : February 19, 2020

ORDER TIME : 11:10 AM

ORDER NO. : 186412-005

CUSTOMER NO: 4327683

FOREIGN FILINGS

NAME: 66 IRELAND LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER: _____



RESUBMIT

Please give original
submission date as file date.

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2020

CSC / KADESHA ROBERSON

SUBJECT: 66 IRELAND LLC
Ref. Number: W20000018458

We have received your document for 66 IRELAND LLC and the authorization to debit your account in the amount of \$130.00. However, the document has not been filed and is being returned for the following:

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 420A00003869

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 66 IRELAND 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:

James C. Ricca, Esq.

Name of Person

Forchelli Deegan Terrana LLP

Firm/Company

333 Earle Ovington Blvd., Suite 1010

Address

Uniondale, NY 11553

City/State and Zip Code

JRicca@Forchellilaw.com

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

For further information concerning this matter, please call:

James C. Ricca

516

248-1700

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. 66 Ireland 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. New York
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 26-0830412
(FEI number, if applicable)

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

5. 128 Harbor Lane
(Street Address of Principal Office)

6. 128 Harbor Lane
(Mailing Address)

Massapequa, New York 11765

Massapequa, New York 11765

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

Name: John T. Adams

Office Address: 1903 Atlantic Street, Unit 231

Melbourne Beach, Florida 32951
(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.

(Registered agent's signature)

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2020 FEB 20 AM 9:40
CLERK OF CIRCUIT COURT
JULIA A. GRIFFIN

FILED

2020 FEB 20 AM 9:40

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:**

☐ Manager Name: John T. Adams

☒ Member Address: 128 Harbor Lane

☐ Authorized Massapequa, New York 11765

Person

☐ Other ☐ Other

Title or Capacity: **Name and Address:**

☐ Manager Name: Elizabeth C. Adams

☒ Member Address: 128 Harbor Lane

☐ Authorized Massapequa, New York 11765

Person

☐ Other ☐ Other

☐ Manager Name: James J. Carpenter

☒ Member Address: 21 Conscience Bay Road

☐ Authorized Setauket, New York 11733

Person

☐ Other ☐ Other

☐ Manager Name: Nancy Ann Carpenter

☒ Member Address: 21 Conscience Bay Road

☐ Authorized Setauket, New York 11733

Person

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

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 605.02(3)(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.

John T. Adams

Signature of an authorized person

Typed or printed name of signer

**State of New York
Department of State } ss:**

I hereby certify, that 66 IRELAND LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 09/06/2005, and that the Limited Liability Company is existing so far as shown by the records of the Department.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 18th day of February
two thousand and twenty.*

Brendan C. Hughes

Brendan C. Hughes
Executive Deputy Secretary of State

FILED
2021 FEB 20 AM 9:40
CLERK OF THE COURT