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July 19, 2013

FRED LAMARCA POTTER & LAMARCA LLP 101 TYRELLAN AVENUE SUITE 400 STATEN ISLAND, NY 10309

SUBJECT: LHM MANAGEMENT CO. INC.

Ref. Number: W13000040763

We have received your document for LHM MANAGEMENT CO. INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

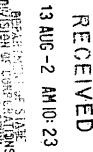
The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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) 245-6052.

Pamela Smith Regulatory Specialist II

Letter Number: 813A00017609



### **COVER LETTER**

TO:	New Filing Se Division of Co					
SUB.	<sub>IECT:</sub> LHM	Management Co	o. Inc.			
		Name of corporat	ion - must include suffix			
Dear :	Sir or Madam:	•				
"Certi	ficate of Existen	tion by Foreign Corporation to ce," or "Certificate of Good S gn corporation to transact bus	tanding" and check are sub-	ct Business in Florida," mitted to register the		
	return all corres d LaMarca	pondence concerning this ma	tter to the following:			
			of Person			
PO	TTER & L	AMARCA LLP				
101	Tyrellan	Firm/C Avenue Suite 400	ompany )			
Sta	ten Island	Ad , <b>NY 10309</b>	dress	t		
flan	narca@plcp	•	e and Zip code			
	<u> </u>	E-mail address: (to be use	ed for future annual report n	otification)		
For fu	rther information	concerning this matter, pleas	se call:			
Fre	d LaMarca	a <sub>at (</sub> 718	227-8000			
	Name of Perso		ea Code & Daytime Telepho	one Number		
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Enclos	ed is a check for	the following amount:				
□ \$70	0.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	' \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy		

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"		
LHM Mai	nagement FL Co. Inc.				
(If name unavail	able in Florida, enter alternate corporate na	ame	adopted for the purpose of transacting business in Florid	ia)	
New York	<b>K</b>	3	27-1530434		
	under the law of which it is incorporated)	_ ~.	(FEI number, if applicable)		
12/21/20	09	5.	perpetual		
(Date	of incorporation)		(Duration. Year corp. will cease to exist or "perpetua	")	
06-03-20	13				
57 Everet		7.15	n Florida, if prior to registration) 502, F.S., to determine penalty liability) 7 10309		
	(Principal office	addı	ress)		
57 Everett	Avenue Staten Island N'	Y 1	10309		
-	(Current mailing	addı	ress)		
Office Ad	min Service Employmer	nt		تن تن	CIAIG
(Purpose(s	) of corporation authorized in home state of	r co	untry to be carried out in state of Florida)	and Bug	2
Name and stree	t address of Florida registered agent:	(P.C	D. Box NOT acceptable)	-2	2
Name:	Incorporating Services	, L	<u>.td.</u>	H	
Tice Address:	1540 Glenway Drive			11:11 HA	
	Tallahassee		, Florida 32301	Ł	

#### 10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:		
A. DIRECTORS		
Chairman: Leonard Eidlen		
Address 57 Everett Avenue		
Staten Island NY 10309		-
Vi∞ Chairman: Heather Eidlen		
Address: 57 Everett Avenue		
Staten Island NY 10309	to many	
Director: Matthew Eidlen		******
Address: 57 Everett Avenue	THESE & SECTIONS OF THE PROPERTY ASSUMED AND	remn /
Staten Island NY 10309	• • •	* *
Director: Gregory Eidlen	ereddina'r marananau, v. ebr	*** *
Address: Staten Island NY 10309		NAMES OF TAXABLE PARTY.
	led r . agrinovic	
B. OFFICERS	1	 ra
President: Heather Eidlen	<u>تن</u> ا	INIS
Address: 57 Everett Avenue	E E	SE SE
Staten Island NY 10309	2	- F.A.
Vice President: Leonard Eidlen	呈	- 1797 1797 1707
Address 57 Everett Avenue	••	75.7
Staten Island NY 10309	<u>-</u>	- SKS
Secretary: Matthew Eidlen	*******	u
Address: 57 Everett Avenue Staten Island NY 10309	***************************************	-
Treasurer: Gregory Eidlen	are is wanter is	. •
Address: 57 Everett Avenue Staten Island NY 10309	p in absence to apply by concentrate	****
NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors		
13.	•	
Signature of Director or Officer	Mariana Maria and	phin
The officer or director signing this document (and who is listed in number 12 above) affirms that the facts state are true and that he or she is aware that false information submitted in a document to the Department of State or	n herein onstitutes	
a third degree felony as provided for in s.817.155, F.S. Leonard Eidlen Vice President		
(Typed or printed name and capacity of person signing application)		***

# State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of LHM MANAGEMENT CO. INC. was filed on 12/21/2009, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



SECRL TARY OF SPATE BIVISION OF GORPHATTINES

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 25th day of June two thousand and thirteen.

First Deputy Secretary of State