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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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FILED





Tallahassee, FL 32301-2607 850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations From: Alexxis Weiland-Sorenson Ext: 61592 Date: 05/15/23 Order #: 1214377-2 Re: PELHAM PARKWAY TERRACE OWNERS CORP. Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority Amount to be deducted from our State Account: \$78.75 - FL State Account Number: 120000000195

AUTH

nedelenan

Please take the following action: File in your office on basis CERTIFIED COPY

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Registration Section Division of Corporations

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·.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Seth Liebenstein, Esq.

| | Name c | f Person | | |
|---|--------------------|------------------------|---|--|
| Seyfarth Shaw LLP | | | | |
| | Firm/Co | mpany | | |
| 620 Eighth Avenue, FL 33 | | | | |
| | Ado | lress | | |
| New York. NY 10018 | | | | |
| <u> </u> | City/State | and Zip code | ···· <u></u> | |
| sliebenstein@seyfarth.com | · | | | |
| E-mail add | lress: (to be used | for future annual repo | rt notification) | |
| For further information concerning th | is matter, please | call: | | |
| Mark Balsam | 917 at (| 747-0411 | | |
| Name of Person | Area Co | de Daytime Tel | ephone Number | |
| STREET/COURIER ADD | RESS: | MAILING | ADDRESS: | |
| Registration Section | | | Registration Section | |
| Division of Corporations | | | Division of Corporations | |
| The Centre of Tallahassee | | | P.O. Box 6327 | |
| 2415 N. Monroe Street, Suite Tallahassee, FL 32303 | 810 | Lallahassee | - FL 32314 | |
| Enclosed is a check for the following | amount: | | | |
| Please make check payable to: FLORIDA | | T OF STATE | | |
| □ \$70.00 Filing Fee □ \$78.75 Filing Fee 8 | | 🔳 \$78.75 Filing Fee & | . 🔲 \$87.50 Filing Fee. | |
| Certifica | ate of Status | Certified Copy | 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.

PELHAM PARKWAY TERRACE OWNERS CORP.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc." "Co," or "Corp.")

| New York | able in Florida, enter alternate corporate name ado | | - |
|------------------|---|---|-------|
| (State or countr | y under the law of which it is incorporated) | (FEI number, if applicable) | |
| 12/21/1987 | 5. | | |
| (Date | of incorporation) | (Date of duration, if other than perpetual) | |
| 05/19/2023 | | | |
| | (Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502 | | (y) |
| 500 Mamaroneck | Ave. Ste 320, Harrison. NY 10528 | | |
| | (Principal office | street address) | |
| | | | 202 |
| | (Current mailing a | ddress, if different) | 3 HAY |
| Nume and store | t address of Blasida registered events (D.O. I | NOT eccentral a | 115 |
| Name and stree | et address of Florida registered agent: (P.O. E | sox <u>NOT</u> acceptable) | |
| Name: | Corporation Service Company | | E P |
| fice Address: | 1201 Hays Street | _ | 9.01 |
| | Tallahassee | . Florida 32301 | · |
| | (City) | (Zip code) | |

9. 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.

Corporation Service Company By: Alixing Weilard Sorenson, Aup

10. 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.

A. DIRECTORS

.

| □Chairman | Name: | □Chairman | Arnold Balsam Name: |
|-----------------|----------------------------|-----------------|------------------------|
| □Vice Chairman | Address: | □Vice Chairman | Address: |
| Director | New York. NY 10065 | Director | New York, NY 10065 |
| President | | □President | |
| □Vice President | | □Vice President | |
| Secretary | Treasurer | Secretary | Treasurer |
| □Other | Other | Other | |
| □Chairman | Arnold Balsam | □Chairman | Name: |
| □Vice Chairman | 200 East 65th Street, #15D | □Vice Chairman | Address: |
| Director | New York, NY 10065 | Director | |
| □President | | □President | |
| □Vice President | | □Vice President | |
| Secretary | Treasurer | | Treasurer |
| Other | Other | □Other | Other |
| Chairman | Name: | □Chairman | Name: |
| □Vice Chairman | Address: | □Vice Chairman | Address; |
| Director | | Director | |
| □President | | President | <u></u> |
| □Vice President | | □Vice President | |
| Secretary | □ Treasurcr | Secretary | |
| □Other | □Other | □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.

12. Penda

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

Arnold Balsam, Secretary

STATE OF NEW YORK DEPARTMENT OF STATE **Certificate of Status** I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected: **Entity Name:** PELHAM PARKWAY TERRACE OWNERS CORP. **DOS ID Number:** 1209460 DOMESTIC BUSINESS CORPORATION Entity Type: **Entity Status:** EXISTING Date of Initial Filing with DOS: 12/21/1987 **Statement Status:** CURRENT Statement Due Date: 12/31/2023

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on May 12, 2023 at 05:35 P.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C. Highan

By Brendan C. Hughes Executive Deputy Secretary of State

Authentication Number: 100003495310 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at <u>http://ecorp.dos.ny.gov</u>