## F24000002257

(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:				

Office Use Only



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CSC - Tallahassee CSC 1201 Hays Street Tallahassee, FL 32301-2607 850-558-1500, Ext:

To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext:

Date: 04/25/24 Order #: 1492327-1

Re: Excess Space Retail Services, Inc.

Processing Method: Routine

## TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Authority

Amount to be deducted from our State Account: \$70.0 - FL State Account Number:

Certificate of Good Standing from State of Incorporation AUTH

Please take the following action:

File in your office on basis

Issue Proof of Filing

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**

_	ion of Corporations				
SUBJECT:	Excess Space Retail Services	, Inc.			
3023337		of corporation - r	nust include suffix		
Dear Sir or M	adam:				
"Certificate o	"Application by Foreign Co f Existence," or "Certificate ced foreign corporation to tr	of Good Standin	ig" and check are subn		
Please return	all correspondence concerni	ng this matter to	the following:		
Michelle Moez	zi				
		Name of Per	son		
Excess Space I	Retail Services, Inc., a Newman	rk Company			
		Firm/Compa	ny		
Attn. Entity M	anagement, 110 E. 59th Street				
		Address			
New York, NY	' 10022				
		City/State and	Zip code		
Entity_Manage	ement@cantor.com				
	E-mail address	: (to be used for	future annual report no	otification)	
For further in	formation concerning this m	atter, please call:			
Michelle Moezzi at (212		at ( <sup>212</sup> )	829-4981		
Name	e of Person	Area Code	Daytime Telepho	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	check for the following amo eck payable to: FLORIDA DE ng Fee	EPARTMENT OF g Fee & 🔻 🗆 \$1	STATE 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.

(If name unavail	able in Florida, enter alternate corporate	name adopted for the purpose of transacting business	in Florida)	-
California	·	33-0595793		
	y under the law of which it is incorporate			-
1/13/1994		5. (Date of duration, if other than perpet		_
(Date	of incorporation)	(Date of duration, if other than perpet	пяІ)	
upon filing				_
		iness in Florida, if prior to registration) 607.1502, F.S., to determine penalty liability)		
290 Broad Hollo	w Road, Melville, NY 11747			_
	(Princi	pel office street address)		
Attn.: Entity Ma	nagement, 110 E. 59th St., New York, N		24	_ ≟,
_	(Current	mailing address, if different)	Ą₽R	XOIS
		(DO D. NOT. ALL)	23	(3)
. Name and stree	et address of Florida registered agent	: (P.O. Box NOT acceptable)	70	0000
Name:	Corporation Service Company		<b>t</b> -	202
Office Address:	1201 Hays Street			21.0
	Tallahassee	, Florida	•	7.7
	(City)	(Zip code)		
laving been nan esignated in this	application, I hereby accept the ap omply with the provisions of all stat	t service of process for the above stated corporat pointment as registered agent and agree to act it tutes relative to the proper and complete perforn my position as registered agent.	n this capa	i <i>city</i> .

under the law of which it is incorporated.

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 Scoretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS							
Chairman	Name: Barry Gosin	□Chairman	Name: James D. Kuhn				
□Vice Chairman	Address:Address:	□Vice Chairman	Address: 125 Park Ave., NY, NY 10017				
Director		Director					
President		<b>■</b> President					
□Vice President		□Vice President					
☐ Secretary	☐Treasurer	□ Secretary	☐ Treasurer				
Other CEO	Other	<b>B</b> Other	Other				
	AND LONG IN		Labora Davida				
□Chairman	Michael Rispoli	□ Chairman	Joshua Davis Name:				
□Vice Chairman	Address:	☐ Vice Chairman	Address:Address:				
Director		□Director					
□President		□President					
□Vice President		□Vice President					
☐ Secretary	<b>■</b> Treasurer	Secretary	☐ Treasurer				
☐Other	Other	■Other	General Counsel				
□Chairman	Name:	□ Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President		□President					
`□Vice President		□Vice President					
Secretary	Truasurer	☐ Secretary	□Treasurer				
□Other	Other	□Other	□Other				
	Use an attachment to report more than six (6). The added to the index when filing your Florida Department.						
12							
	Signature of Direct	tar 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.							
13. Michael Risp	pali	· · · · · · · · · · · · · · · · · · ·					



I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name: EXCESS SPACE RETAIL SERVICES, INC.

**Entity No.:** 1879537 **Registration Date:** 01/13/1994

Entity Type: Stock Corporation - CA - General

Formed In: CALIFORNIA

Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of April 25, 2024.

SHIRLEY N. WEBER, PH.D.

Secretary of State

Certificate No.: 203942224

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.