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COVER LETTER

10:	Division of Corpo				
SUBJ	ECT:	L&L BUILDE	RS AND DI	EVELOPERS, CO	ORP.
		Name of corpora			
Dear S	Sir or Madam:				
"Certi	ficate of Existence,'	n by Foreign Corporation or "Certificate of Good corporation to transact by	Standing" a	and check are sub	
Please	return all correspor	ndence concerning this m	atter to the	following:	
		DAVID I	TABE <u>R JI</u>	₹.	
			e of Person		
		CONTRACTO	RLICENSIN	NG INC.	
			Company		
		P.O. I	BOX 2122		
			Address		
		MARCO ISI	AND EL 2	4146	
			ate and Zip		
DAVII	D@CONTRACTOR	LICENSINGINC.COM			
21111	34,00.111110101	E-mail address: (to be u	sed for futu	re annual report i	notification)
For fu	rther information co	oncerning this matter, ple	ase call:		
		•			
	DAVID L. TABE	R JR at (2	39) 394-	-2300	
	Name of Person	Area	Code	Daytime Telep	hone Number
	STREET/COUR Registration Section Division of Corporate Centre of Tal 2415 N. Monroe Stallahassee, FL 3	on orations lahassee Street, Suite 810		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, H	Section orporations 7
Please	make check payable t	e following amount: o: FLORIDA DEPARTM \$78.75 Filing Fee & Certificate of Status	□ \$78.7	ATE 5 Filing Fee & fied Copy	S87.50 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.

			usiness in Florida)	
NEW JERSEY	3. 2	2-3744694		
(State or counti	y under the law of which it is incorporated)	(FEI number, if applic	able)	
07/28/2000	5			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150	2, F.S., to determine penalty liability)		
841 FRANKLIN	AVE, UNIT 6, FRANKLIN LAKES, NJ 0741 (Principal office	e street address)		
		· — · · ·		
	(Current mailing	address, if different)		
			2	
Name and stre	et address of Florida registered agent: (P.O.	Box NOT acceptable)	2024	
		Box NOT acceptable)	2024 (1.77	
Name and stree	et address of Florida registered agent: (P.O. CONTRACTOR LICENSING INC.	Box NOT acceptable)	2024 (2.17 - 7	
			2024 (S.) - 7 A	
Name:	CONTRACTOR LICENSING INC. 601 E. ELKCAM CIR, UNIT B-1			
Name:	CONTRACTOR LICENSING INC.		2024 (5.77 - 7 - AHATE I	

(Registered agent's signature)

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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS							
Chairman	Name: LEONARD P. TURLJR	□ Chairman	Name:				
□Vice Chairman	Address: 841 FRANKLIN AVE, UNIT 6	□Vice Chairman	Address:				
XDirector	FRANKLIN LAKES, NJ 07417	□ Director					
President		□President					
□ Vice President		□Vice President					
□ Secretary	☐ Freasurer	□ Secretary	O'Treasurer				
Other	Other	Other	·				
□ Chairman	Name:		Name:				
C. C.	Address:		Address:				
_		Director					
_		□President					
		□ Vice President					
☐ Secretary	☐ Treasurer	□Secretary	☐ Freasurer				
□Other	🗆 Other	□Other	□Other				
⊡ Chairman I	Name:	□Chairman	Name:				
□Vice Chairman →	Address:	□ Vice Chairman	Address:				
□Director _		Director					
□President _		□President					
□Vice President		□Vice President					
□ Secretary	Treasurer	☐ Secretary	CTreasurer				
□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 intex when filtre fourtherida Department of State Annual Report form. 12							

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.

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

L&L BUILDERS AND DEVELOPERS, CORP. 0100824361

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on July 28, 2000.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

LL BUILDERS AND DEVELOPERS CORP 841 FRANKLIN AVE UNIT 6 FRANKLIN LAKES, NJ 07417



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 3rd day of May, 2024

Elizabeth Maher Muoio State Treasurer

denon Mun

Certificate Number: 6153235376

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp