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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 1, 2003

MARC RESNICK 20-28 FRANCIS LEWIS BLVD. WHITESTONE, NY 11357

SUBJECT: NATIONAL BATHROOM ACCESSORIES LLC

Ref. Number: W03000028129

We have received your document for NATIONAL BATHROOM ACCESSORIES LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 103A00053937

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

NATIONAL BATHROOM ACCESSORIES,LLC		
(Name of foreign limited liability company)		
2. NEW YORK 311-3600403		
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
4. 04/17/2001 (Date of Organization)  5. PERPETUAL (Duration: Year limited liability company will ceal exist or "perpetual")		
(Date of Organization) (Duration: Year limited liability company will cea exist or "perpetual")	se to	
SEPTEMBER 10,2003	83	
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)	130	17
7 20-28 FRANCIS LEWIS BLVD.	23	COMMUNICATION OF THE PERSONS AND ADDRESS AND ADDRES
WHITESTONE,NY 11357	æ	ŢŢ,
(Street address of principal office)	Ö	O
8. If limited liability company is a manager-managed company, check here	ဒ္	
9. The name and usual business addresses of the managing members or managers are as follows:		
MARC RESNICK 6 BEAUMONT DRIVE PLAINVIEW,NY 11803		
DAVID MAJEWSKI 6 CATERINA COURT DIX HILLS,NY 11746		
		ı
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custod the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign la		
translation of the certificate under eath of the translator must be submitted.)	nguago.	, α
11. Nature of business or purposes to be conducted or promoted in Florida: SALES OFFICE		
Signature of a prember or an authorized representative of a member.		

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

NATIONAL BATHROOM ACCESSORIES,LLC

2. The name and the Florida street address of the registered agent and office are:

JOEL WALLACH

(Name)

10471 UTOPIA CIRCLE SOUTH

Florida street address (P.O. Box NOT ACCEPTABLE)

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

(City/State/Zip)



**BOYNTON BEACH** 

1. The name of the Limited Liability Company is:

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

## State of New York | ss: Department of State

I hereby certify, that NATIONAL BATHROOM ACCESSORIES, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 04/17/2001, and that the Limited Liability Company is subsisting so far as shown by the records of the Department. I further certify the following:

An Affidavit of Publication of NATIONAL BATHROOM ACCESSORIES, LLC was filed on 06/21/2001.

An Affidavit of Publication of NATIONAL BATHROOM ACCESSORIES, LLC was filed on 06/21/2001.

A Biennial Statement was filed 03/21/2003.

I further certify, that no other documents have been filed by such Limited Liability Company.

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Witness my hand and the official seal of the Department of State at the City of Albany, this 08th day of October two thousand and three.

Secretary of State

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