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DIVISION OF CORPORATIONS

FOREIGN LIMITED LIABILITY COMPANY

EAGLE BIRDIE II, LLC

Certificate of Status	0
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J. BRYAN AUG 15 2005

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**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 608.02, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACTIONS BUSINESS IN THE STATE OF FLORIDA:**

1. EAGLE BIRDIE II, LLC
(Name of Foreign Limited Liability Company)
2. NEW YORK
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 20-8207382
(FBI number, if applicable)
4. JUNE 17, 2005
(Date of Organization)
5. PERPETUAL
(Duration: Year limited liability company will cease to exist or "perpetual")
6. UPON FILING
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 350 JERICHO TURNPIKE
JERICHO, NY 11753
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here ☐
9. The name and usual business addresses of the managing members or managers are as follows:
BERG, KLEIN & SALOMON, 350 JERICHO TURNPIKE, JERICHO, NY 11753

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida:

The sole purpose of the Company shall be to acquire, own, hold, maintain, manage, operate, improve, renovate, lease, finance, develop, and, if and when appropriate, to sell or otherwise dispose of real property, together with such activities as may be necessary or advisable in connection with the ownership of real property and that incidental thereto.

DENNIS KLEIN
Signature of a member or an authorized representative of a member.
(In accordance with section 606.406(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
DENNIS KLEIN

Typed or printed name of signer

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TALLAHASSEE, FLORIDA

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**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.

1. The name of the Limited Liability Company is:

EAGLE BIRDIE II, LLC

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

ALBERT MITRANI

(Name)

6385 COLLINS AVENUE, APARTMENT 4308

Florida Street Address (P.O. Box NOT ACCEPTABLE)

MIAMI BEACH

FL 33141

City/State/Zip

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, Florida Statutes.



(Signature)

ALBERT MITRANI

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

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State of New York
Department of State } ss:

I hereby certify, that **EAGLE BIRDIE II, LLC** a **NEW YORK** Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 06/17/2005, and that the Limited Liability Company is existing so far as shown by the records of the Department.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 26th day of July
two thousand and five.*

Secretary of State

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