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COVER LETTER

	stration Section sion of Corporations		
SUBJECT:	WATERVLIET SHORES AS		
	(Name of I	imited Liability Company)	
Florida," Ce		Liability Company for Authorization to Transact Business in e submitted to register the above referenced foreign limited a	
Please return	all correspondence concerning th	s matter to the following:	
	Kenneth B. Segel, Esq		
		Name of Person)	
		(4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,	
	Segel, Goldman, Mazzot		
		(Firm/Company)	
THE PARTY OF THE PARTY OF	9 Washington Square	(Address)	i-
· (文) (教育)		(Address)	
	Albany, New York 12	2205	
	(City	/State and Zip Code)	
For further in	nformation concerning this matter,	please call:	
1011010101		Pr-1100 -1111.	
Nar	ncy M. Greene, Esq.	at (518) 452-0941	
	(Name of Person)	(Area Code & Daytime Telephone Number)	
MAI	LING ADDRESS:	STREET ADDRESS:	
Division of Corporations		Division of Corporations	
	Box 6327	Clifton Building	
Talla	hassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 9, 2006

KENNETH B SEGEL ESQ 9 WASHINGTON SQUARE ALBANY, NY 12205

SUBJECT: WATERVLIET SHORES ASSOCIATES, L.L.C.

Ref. Number: W06000006407

We have received your document for WATERVLIET SHORES ASSOCIATES, L.L.C. and your check(s) totaling \$130.00. 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: 106A00009583

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

I. WATERVLIET SH	ORES ASSOCIATES, L.			
	(Name of Foreign Limited	Liability Company)		
2. New York (Jurisdiction under the law company is organized)	of which foreign limited liability	3. (FEI nur	nber, if applicable)	
4. JANUARY 5 (Date of O	eganization)	5. Perpetual (Duration: Year limit exist or "perpetual")	ed liability company w	ill cease to
6.				<u> </u>
(5	(Date first transacted business in Fiee sections 608.501 & 608.502 F.	orida, if prior to registratio . to determine penalty liab	on.) ility)	
7. c/o TriCity Renta	als, 255 Washington Av	enue Extension, A	Albany, New Yo	rk 12205 🕏
	(Street Addres	of Principal Office)		<u>- 3</u> . 6
8. If limited liability co	mpany is a manager-manage	company, check here		S mK
9. The name and usual	business addresses of the ma	aging members or ma	nagers are as follov	₩S:
Norman Massry.	TriCity Rentals, 255 Was	nington Avenue Ext	ension Albany I	NY 12205
rtormar massry,	THORY NORMALO, 200 True	ingion mondo Ext	01101011, 7 110011y, 1	11 12200
the jurisdiction under the law	tificate of existence, no more than 90 of which it is organized. (A photoco der oath of the translator must be sul	ry is not acceptable. If the ce		
11. Nature of business	or purposes to be conducted of	r promoted in Florida:		
Real Estate Ren	tals∕/			
	1/1/1/1			
$\frac{1}{S}$	ignature of a member or an a	thorized representativ	e of a member.	
(E	n accordance with section 608.408(3), a affirmation under the penalties of pe	S., the execution of this doc	ument constitutes	
	NORMAN MASSRY	, mar are result build here!		

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.

1. The name of the Limited Liability Company is:		<u>.</u>		
WATERVLIET SHORES ASSOCIATES, L.L.C.	٠ <u>افيان</u>	.: 		
2. The name and the Florida street address of the registered agent and office are:		5 M.10:		
Bruce M. Gottlieb, Esq., Gottlieb & Gottlieb, Attorneys at (Name)	নি aw	3		
125 North 46th Street Florida Street Address (P.O. Box NOT ACCEPTABLE)				
Hollywood, FL 33021-6601 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)

\$ 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 Department of State } ss:

I hereby certify, that WATERVLIET SHORES ASSOCIATES, L.L.C. a NEW YORK Limited Liability Company filed a Certificate of Conversion pursuant to the Limited LIability Company Law on 01/05/2006, and that the Limited Liability Company is existing so far as shown by the records of the Department.

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



200602280430 * 27

Witness my hand and the official seal of the Department of State at the City of Albany, this 27th day of February two thousand and six.

Daniel Shapiro

Special Deputy Secretary of State