

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

10 APR -9 PM 5:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 1406 000003865 08

1. Limited Liability Company's Name

1815 Building Company LLC
W09-546dele

600163631806
03/23/10--01011--024 **138.75
CR2E041 (11/09)

2. Principal Office Address - No P.O. Box # <u>750 Lexington Avenue</u>		3. Mailing Office Address <u>750 Lexington Avenue</u>	
Suite, Apt. #, etc. <u>28th Floor</u>		Suite, Apt. #, etc. <u>28th Floor</u>	
City & State <u>New York, NY</u>		City & State <u>New York, NY</u>	
Zip <u>10022</u>	Country	Zip <u>10022</u>	Country

4. State/Country of Formation

5. Date Organized or Qualified
To Do Business in Florida

6. FEI Number

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name
Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

Suite, Apt. #, Etc.

City
Tallahassee

State
FL

Zip Code
32301

☐ A \$100 reinstatement fee is imposed, except
in circumstances which the entity did not
receive the prior notices. By checking this
box, you are certifying the prior notices were
not received and requesting the \$100
reinstatement be waived.

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of
Registered Agent

[Signature]
Charles S. Cohen

REGISTERED AGENT MUST SIGN

Date 3/11/2010

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
<u>MEM</u>	<u>CHARLES S. COHEN</u>	<u>750 Lexington Avenue</u>	<u>New York, NY 10022</u>

600163631806
12/15/09--01041--014 **238.75

REINSTATEMENT 108-10

DB

600163631806
04/13/10--01002--011 **138.75

11. E-mail Address:

(To be used for future annual report notifications)

12. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in Chapter 608, F.S. I further certify that when
filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that
all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect
as if made under oath.

Signature of
Managing Member/Manager

[Signature]
Charles S. Cohen

Date

3/11/10

Daytime Phone #

(212) 590-5242

Typed or printed name of signing Managing Member/Manager

Charles S. Cohen



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 24, 2010

1815 BUILDING COMPANY LLC
750 LEXINGTON AVENUE, 28TH FLOOR
NEW YORK, NY 10022

SUBJECT: 1815 BUILDING COMPANY LLC
Ref. Number: M06000003865

We have received your document for 1815 BUILDING COMPANY LLC and your check(s) totaling \$377.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Any reinstatement application received after January 1st must include the fees for next year's annual report. Please be sure to include an additional \$138.75 if your reinstatement is submitted after January 1st.

The fees to reinstate the limited liability company are as follows: \$100.00 reinstatement fee; \$138.75 filing fee per year for the years 2008 through 2010; and \$5.00 for each certificate of status requested (optional). Therefore, the total amount due at this time is \$516.25.

There is a balance due of \$138.75.

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) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 310A00007220