M06000005616

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Thomas hugo and
WITHORIZATION BY PHONE TO WITHORIZATION BY PHON
10/12/06 G1
W06-44633

Office Use Only



100080383161

10/10/06-01040--003 **87.50

10/18/06--01003--007 **72.50

DIVISION OF CORPORATIONS

Dod

COVER LETTER

TO: New Filing Section Division of Corporations							
SUBJECT: New YORK'S Finest Private Truestigative Services LLC (Name of corporation - must include suffix)							
Dear Sir or Madam:							
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.							
Please return all correspondence concerning this matter to the following:							
Thomas V. Luco (Name of Person)							
(Name of Person)							
New York's Finest Private Investigative Services LLC (Firm/Company)							
329 Warren Street (Address)							
W. Babylon, Ny 11704. (City/Stale and Zip code)							
(City/Stale and Zip code)							
• • • •							
For further information concerning this matter, please call:							
Tom Lugo at (631, 422-5610 (office)							
Tom Lugo at (63) 1422-5610 (office) (Name of Person) (Area Code & Daytime Telephone Number)							
631 492-7157 (cell).							
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327							
2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301							
Enclosed is a check for the following amount:							
\$70.00 Filing Fee \$\bigcup \$78.75 Filing Fee & \$\bigcup \$78.75 Filing Fee & \bigcup \$87.50 Filing Fee, Certificate of Status & Certified Copy Certified Copy \$87.50 Filing Fee, Certified Copy							



October 11, 2006

THOMAS V. LUGO 329 WARREN STREET W. BABYLON, NY 11704

SUBJECT: NEW YORK FINEST PRIVATE INVESTIGATIVE SERVICES LLC

Ref. Number: W06000044633

We have received your document for NEW YORK FINEST PRIVATE INVESTIGATIVE SERVICES LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

There is a balance due of \$72.50.

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.

Letter Number: 006A00060527

Deborah Bruce Document Specialist

New York's Finest Private Investigative Services, LLC

329 Warren Street W. Babylon, NY 11704

Office: (631) 422-5610 Fax: (631) 539-8575 Cell: (631) 492-7151

WEB: WWW.NYFINESTPI.COM

EMAIL nyfinestpi@optonline.net

*Licensed *Bonded *Insured

"This business is licensed by the New York Department of State, Division of Licensing Services."

TO: Florida Dept of State-			FROM: Tom Lugo			
	f Corporations	•	10m Lugo			
	Brenda Tadlock					
COMPANY: Registration Section-Div. of Corps		· ·	DATE: 10-12-06			
FAX NUMBER:		ТОТА	TOTAL NO. OF PAGES INCLUDING COVER:			
PHONE NUM	BER:	SEND	SENDER'S REFERENCE NUMBER			
RE;		YOUR REFERENCE NUMBER:				
URGENT	FOR REVIEW	PLEASE COMMENT	XPLEASE REPLY	PLE ASE RECYCLE		

NOTES/COMMENTS:

Dear Ms. Tadlock,

Please find enclosed the copy of the original application that was overnighted to your office for processing.

Please call me as soon as you receive this package. Thank you for taking the time to assist me on this matter.

Tom Lugo

CONFIDENTIALITY NOTE

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS LEGALLY PRIVILEGED AND CONFIDENTIAL INFORMATION INTUNDED ONLY FOR THE USE OF THE ADDRESSEE NAMED ABOVE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HERBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLESS IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ADDRESS ABOVE VIA THE UNITED STATES POSTAL SERVICE. THANK YOU.

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: York's Fivest Private Investigative Service, LLC (Name of Foreign Limited Liability Company) Wew York

(Jurisdiction under the law of which foreign limited liability

3. 20-1320623

(FEI number, if applicable) company is organized) Perpetul/
(Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 329 WATTEN ST. WEST BARYON MY
(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: 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: Signature of a member 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.)

THOMAS V. Lu
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 Limite	d Liability Company	is:		
New You	KS Fivest	PrivAse	INVISTIGATIVE	Services LLC
2. The name and the Flori	da street address of th	ne registered agen	t and office are:	
THOMAS	V	LUG (Name)	0	SECRE DIVISION 06 OCT
	/5/3 Florida Street Address	LAUT (P.O. BOX NOT ACC	eL Drive	F IL.
	Arwaser		•	OF STATE RPORATION
		City/State/Zip		U.
liability company at the pla agent and agree to act in th relating to the proper and c	ce designated in this c is capacity. I further c omplete performance	ertificate, I hereby agree to comply w of my duties, and I	ocess for the above stated lim accept the appointment as r ith the provisions of all statu I am familiar with and accep apter 608, Florida Statutes.	registered tes
John (Signa	dure)			
	<i>1/</i> '			

\$ 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 NEW YORK'S FINEST PRIVATE INVESTIGATIVE SERVICES, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/01/2004, 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 05th day of October two thousand and six.

Special Deputy Secretary of State

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