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(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 19 2009

LAW OFFICE OF LEE B. GORDON, P.A.
265 SUNRISE AVENUE, SUITE 204
PALM BEACH, FLORIDA 33480-4036
Tel: 561-833-2233
Fax: 561-832-0000

Lee B. Gordon,
Board Certified Real Estate Attorney

VIA FEDERAL EXPRESS

February 17, 2009

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: DJT Fine Art, LLC

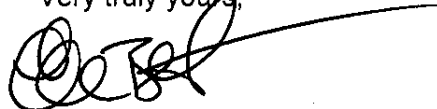
Dear Sir or Madam:

In connection with the above-referenced, attached please find the following:

1. Application By Foreign Limited Liability Company For Authorization To Transact Business In Florida, consisting of a Cover Letter, the Application, and a Certificate Of Designation Of Registered Agent/Registered Office. A copy of same is also enclosed to be "certified" and returned to me.
2. Original certified and sealed Certificate Of Good Standing for DJT Fine Art, LLC, a New Jersey Limited Liability Company.
3. Copy of Limited Power Of Attorney authorizing me to specifically, among other things, execute the enclosed documents on behalf of the managers.
4. Check in the amount of \$160.00 made payable to Florida Department Of State.

Please process our application at your earliest convenience and return same to me in the enclosed return Federal Express envelope. If you have any questions or problems, please do not hesitate to call me at the above number.

Very truly yours,



Lee B. Gordon

enclosures as noted:

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DJT Fine Art, LLC
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Lee B. Gordon, Esquire
(Name of Person)

Law Office of Lee B. Gordon, P.A.
(Firm/Company)

265 Sunrise Avenue, Suite 204
(Address)

Palm Beach, FL 33480
(City/State and Zip Code)

For further information concerning this matter, please call:

Lee B. Gordon at (561) 833-2233
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

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

1. DJT Fine Art, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. New Jersey 3. 22-3785499
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 2/6/2001 5. perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 313 1/2 Worth Avenue, Suite B-7
Palm Beach, FL 33480
(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☐

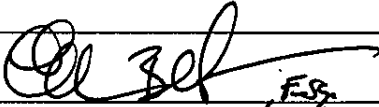
9. The name and usual business addresses of the managing members or managers are as follows:

<u>Sally Taglialatella</u>	<u>Dominic Taglialatella</u>
<u>66 Crabapple Road</u>	<u>66 Crabapple Road</u>
<u>Gillette, NJ 07933</u>	<u>Gillette, NJ 07933</u>

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: _____

Art Gallery


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.)

Lee B. Gordon, Esquire

Typed or printed name of signee

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09 FEB 18 AM 10:50
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**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:

DJT Fine Art, LLC

If name unavailable, the alternate name to be used in the state of Florida is:

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

Lee B. Gordon, Esquire

(Name)

265 Sunrise Avenue, Suite 204

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

Palm Beach

FL

33480

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)

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TALLAHASSEE FLORIDA
SECRETARY OF STATE

**STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING**

DJT FINE ART, LLC.

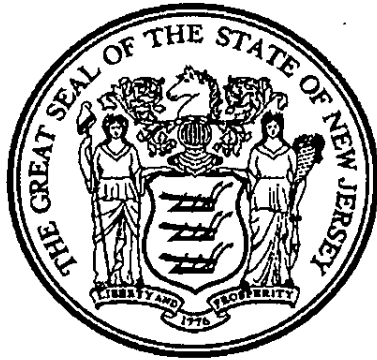
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I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on February 6, 2001.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify the registered agent and registered office are:

*Dominic Taglialatella
66 Crabapple Lane
Gillette, NJ 07933*



Certificate Number: 113640766

Verify this certificate online at

http://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed
my Official Seal at Trenton, this
10th day of February, 2009*

A handwritten signature in black ink, appearing to read "R. David Rousseau", is written over a horizontal line.

*R. David Rousseau
State Treasurer*

Prepared by:
Lee B. Gordon, Esquire
Lee B. Gordon, P.A.
265 Sunrise Avenue, Suite 204
Palm Beach, FL 33480

LIMITED POWER OF ATTORNEY

KNOW ALL PERSONS BY THESE PRESENTS, THAT WE, DOMINIC TAGLIALATELLA and SALLY TAGLIALATELLA, *individually and as managing* members of DJT Fine Art, LLC, a New Jersey limited liability company, whose address is 66 Crabapple Road, Gillette, NJ 07933, as grantor*, has made, constituted and appointed, and by these presents does make, constitute and appoint LEE B. GORDON, ESQUIRE, whose business address is 265 Sunrise Avenue #204, Palm Beach, FL 33480, as my true and lawful attorney for me and in my name, place and stead, giving and granting unto LEE B. GORDON, ESQUIRE, said attorney, full power and authority to do and perform all and every act and thing whatsoever requisite and necessary to be done in and about the premises as fully, to all intents and purposes, as I might or could do if personally present, with full power of substitution and revocation, hereby ratifying and confirming all that LEE B. GORDON, ESQUIRE, said attorney, or substitute, shall lawfully do or cause to be done by virtue hereof.

*Wherever used herein, the term "grantor" shall include singular and/or plural, masculine, feminine and/or neuter wherever the context so requires or admits.

THIS POWER OF ATTORNEY IS LIMITED TO ANY AND ALL MATTERS PERTAINING TO OUR OPENING AND OPERATION OF DJT FINE ART, 313 ½ WORTH AVENUE, SUITE B-7, PALM BEACH, FLORIDA, AND INCLUDES, BUT IS NOT LIMITED TO, THE RIGHT OF MY SAID ATTORNEY-IN-FACT TO EXECUTE ANY APPLICATIONS WITH THE STATE OF FLORIDA IN ORDER TO QUALIFY TO DO BUSINESS IN THE STATE OF FLORIDA; ANY APPLICATIONS FOR A BUSINESS TAX RECEIPT WITH THE TOWN OF PALM BEACH AND/OR PALM BEACH COUNTY, FLORIDA; AND ANY AND ALL SERVICES OR REQUIREMENTS DEEMED NECESSARY OR DESIRABLE IN CONNECTION WITH THE OPENING

AND OPERATION OF DJT FINE ART, 313 1/2 WORTH AVENUE, PALM BEACH,
FLORIDA 33480 (INCLUDING BUT NOT LIMITED TO, TELEPHONE, CABLE,
ELECTRIC, ALARM, SIGNAGE, ETC.).

IN WITNESS WHEREOF, we have hereunto set our hands and seals this
5th day of February, 2009.

Signed, sealed and delivered
in the presence of:

"grantor"

Brenda K. Martinson

Sally Tagliatella
SALLY TAGLIATELLA

Print: BRENDA K. MARTINSON

Lynne Spozarsky

Print: LYNNE SPOZARSKY

Brenda K. Martinson

Dominic Tagliatella
DOMINIC TAGLIATELLA

Print: BRENDA K. MARTINSON

Lynne Spozarsky

Print: LYNNE SPOZARSKY

STATE OF FLORIDA

COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 5th day of February, 2009, by Dominic Taglialatella, who is personally known to me or who has produced a _____ Driver's License or _____ (indicate form of identification) (if left blank, personal knowledge existed) as identification.

Lynne E. Spozarsky
Notary Public, State of Florida

Notary Print Name: _____

My Commission Expires: _____



STATE OF FLORIDA

COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 5th day of February, 2009, by Sally Taglialatella, who is personally known to me or who has produced a _____ Driver's License or _____ (indicate form of identification) (if left blank, personal knowledge existed) as identification.

Lynne E. Spozarsky
Notary Public, State of Florida

Notary Print Name: _____

My Commission Expires: _____

