M10000001054

(Requestor's Name)							
(Address)							
,							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Eddsiness Endry Harrie)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
-							

Office Use Only



000170918930

03/05/10--01042--006 **130.00

10 MAR -5 AH 图: 24

SECRETARY DESTATE DIVISION OF GERPORATION

T. HAMPTON

MAR - 8 2010

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporation	ons .							
SURI	ECT:	WH	IY ASAP	LLC.					
			ne of Limited		mpany				
_							_		
						ransact Business in Florida," Certificative company to transact business in Flo			
Please	e return all correspondence	e concerning this ma	tter to the fol	lowing:					
			Barry I	Bookman					
			Name	of Person					
WHY ASAP, L.L.C.									
Firm/Company									
8825 Huntington Pointe Drive									
Address									
		Si	arasota, F	lorida. 342	238				
City/State and Zip Code									
			barrybool	@aol.con	n				
	<u> </u>	E-mail address: (to	o be used for	future annua	report not	ification)			
For fu	rther information concern	ning this matter, pleas	e call:						
	Вап	y Bookman	81	609	_)	206-0909			
	Nan	e of Person	Area Co	de & Daytim	e Telephon	e Number			
	MAILING ADDRES	S:	STREET A	DDRESS:					
	Division of Corporation		Division of	Corporations	3				
	Registration Section		Registration						
	P.O. Box 6327		Clifton Bui	-					
	Tallahassee, FL 32314	,	2661 Execu Tallahassee	tive Center C , FL 32301	Circle				
Enclo	osed is a check for the	e following amou	nt:						
	\$125.00 Filing Fee	\$130.00 Filing Certificate of		\$155.00 Fili Certi	ing Fee & fied Copy	\$160.00 Filing Fee, Certificate of Status & Certified Copy			

~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:

1.	WHY ASAP, L.L.C. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
co	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written nsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C," "LLC.")
2.	New Jersey (Jurisdiction under the law of which foreign limited liability company is organized) New Jersey (FEI number, if applicable)
4.	March 2003 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6.	NONE TO DATE (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	8825 Huntington Pointe Drive
	Sarasota, Florida 34238 (Street Address of Principal Office)
	If limited liability company is a manager-managed company, check here The name and usual business addresses of the managing members or managers are as follows:
	Barry Bookman (Managing Member)
	8825 Huntington Pointe Drive
	Sarasota, FL 34238
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, and aslation of the certificate under oath of the translator must be submitted.)
11	. Nature of business or purposes to be conducted or promoted in Florida: WHY ASAP, L.L.C. Sales Representative/Wholesale sales
	Sales Representative/vvnolesale sales
	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.)
	Barry Bookman
	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	Compa	any is:		
	WHY	ASAP, L.L.C.		
If unavailable, the alternate to be use	d in the	state of Florida is:		
		NONE		
2. The name and the Florida street a	ddress o	of the registered agent and office are:		
	Ва	arry Bookman		
		(Name)		
88	325 Hui	ntington Pointe Drive		
Florida St	reet Addr	ress (P.O. Box <u>NOT</u> ACCEPTABLE)		
	Saraso	ota, Florida 34238		
		City/State/Zip	_	
liability company at the place designal agent and agree to act in this capacity relating to the proper and complete peobligations of my position as registere (Signature)	ted in th . I furth erforma	• • •	tment as r of all statu and accept	egistered tes
	25.00	Designation of Registered Agent	-5	

5.00

Certificate of Status (optional)

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY SHORT FORM STANDING

WHY ASAP, L.L.C.

0600165301

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 March 24, 2003.

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 that the registered agent and registered office are:

Barry Bookman 423 Commerce Lane - Unit #6 West Berlin, NJ 08091



Certification# 116510493

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 1st day of March, 2010

Acting State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp