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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

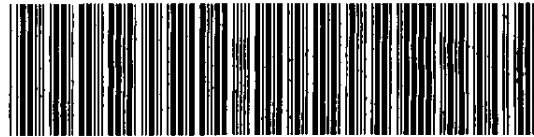
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**A. LUNT**

APR 22 2010

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 APR 20 PM 2:16

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# DEGRADO HALKOVICH, LLC

## ATTORNEYS AT LAW

PAUL K. DeGRADO \* †  
JEFFREY M. HALKOVICH +  
HOWARD I. GORDON  
CHRISTOPHER S. MAHONEY+  
CHARLES L. ROBINSON

† Also Admitted in New York  
and the District of Columbia  
+ Also Admitted in New York

\*Certified by the Supreme Court  
of New Jersey as a Civil Trial  
Attorney

April 15, 2010

Attn: Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**Re: Application by Foreign Limited Liability Company for Authorization to  
Transact Business in Florida  
Company Name: DeGrado Halkovich, LLC**

Dear Sir/Madame:

Enclosed, please find the following:

1. Cover Letter
2. Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida
3. Certificate of Designation of Registered Agent/Registered Office
4. State of New Jersey Department of the Treasury Short Form Standing
5. Certificate Validation
6. Check in the amount of \$155.00 to cover costs of registration

Should you have any questions, please feel free to contact this office.

Very truly yours,

PAUL K. DeGRADO

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2 University Plaza, Suite 400 · Hackensack, NJ 07601  
Ph: 201.678.9007 · No-Fault Fax: 201.678.1771 · Litigation Fax: 201.678.2875

861 Manhattan Avenue, Suite 6 · Brooklyn, NY 11222  
Ph: 917.748.1370 (Please Respond to NJ Office)

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DEGRADO HALKOVICH, 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:

Paul K DeGrado  
Name of Person

DeGrado Halkovich, LLC  
Firm/Company

2 University Plaza, Suite 400  
Address

Hackensack, NJ. 07601  
City/State and Zip Code

paul.degrado@olegradolaw.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul K. DeGrado at ( 201 ) 678-9007  
Name of Person Area Code & Daytime Telephone Number

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

**STREET ADDRESS:**  
Division of Corporations  
Registration Section  
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

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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**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. DEGRADO HALKOVICH, LLC.  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

N/A.

(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. 20-8350997  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. November 8, 2006 5. perpetual  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

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

7. 2 University Plaza, Suite 400  
Hackensack, N.J. 07601  
(Street Address of Principal Office)

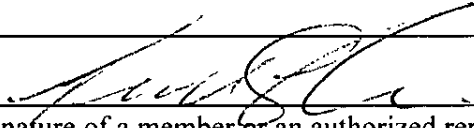
8. If limited liability company is a manager-managed company, check here ☐

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

Paul K. DeGrado, 2 University Plaza,  
Suite 400  
Hackensack, N.J. 07601

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: Law Office

  
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.)

Paul DeGrado

Typed or printed name of signee

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CLERK OF DISTRICT COURT  
JUDICIAL CIRCUIT IN AND FOR  
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:

DEGRADO HALKOVICH, LLC

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

N/A

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

Agents and Corporations, Inc.  
(Name)

300 Fifth Avenue South  
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Naples FL 34102  
City/State/Zip

STATE OF FLORIDA  
CLERK OF THE COURT  
TALLAHASSEE, FLORIDA

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*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]  
(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 JERSEY  
DEPARTMENT OF THE TREASURY  
SHORT FORM STANDING**

**DEGRADO HALKOVICH, LLC**

0600283831

*With the Previous or Alternate Name*

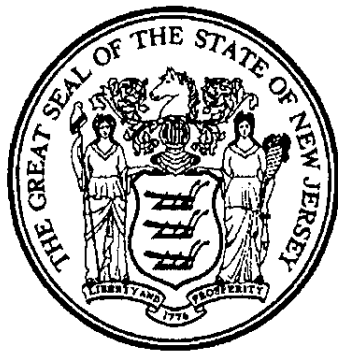
**PAUL K. DEGRADO AND ASSOCIATES, L.L.C. (Previous Name)**

*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 November 8, 2006.*

*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:*

*Degrado Halkovich, Llc  
Two University Plaza, Ste 400  
Hackensack, NJ 07601*



Certification# 116884761

*IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed my  
Official Seal at Trenton, this  
15th day of April, 2010*

A handwritten signature in black ink, appearing to be "K. J.", is written over a horizontal line.

State Treasurer

Verify this certificate at  
[https://www1.state.nj.us/TYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp)