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SECRETARY OF STATE
ALLAHASSEF FERIE

D. BRUCE
OCT 31 2011
EXAMINER

#### **COVER LETTER**

Registration Section
Division of Corporations

TO:

SUBJECT: ATLANTIS WORLDW	VIDE, LLC	
	ne of Limited Liability Company	
	ility Company for Authorization to Transact Business in bove referenced foreign limited liability company to trans	
Please return all correspondence concerning this ma	itter to the following:	
Howard W. Segal, Esq.		
	Name of Person	
Howard W. Segal, P.C.		
	Firm/Company	
845 Third Avenue, Suite	1740	<del></del>
	Address	
New York, New York 100	922	,
New Tork, New Tork Too		****
	City/State and Zip Code	
jeffweiss@atlantiswor	ldwide.com	AR ST
	o be used for future annual report notification)	→SE =
		SERY SE
For further information concerning this matter, please	se call:	CT 28 ANII
Howard W. Segal	<sub>a1</sub> (212 ) 223-3880	AFII: 08 OF STATE E. FLORIDO
Name of Person	Area Code & Daytime Telephone Number	<u>6</u> 8
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations	Division of Corporations	
Registration Section	Registration Section	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	
	Tallahassee, FL 32301	
Enclosed is a check for the following amount	nt:	
\$125.00 Filing Fee \$130.00 Filing Fe	e & \$\int\\$155.00 \text{ Filing Fee & \$\int\\$160.00 \text{ Filing Fee, 6}\$	
Certificate of Stat	us Certified Copy of Status & Certified	d 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. Atlantis Worldwide, LLC  (Name of Foreign Limited Liability Company; must include	
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company,""L.L.C,""LLC.")	
Delaware     (Jurisdiction under the law of which foreign limited liability company is organized)     3.	(FEI number, if applicable)
4. April 3, 2002 5.	Perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")
6. June 15, 2011  (Date first transacted business in Flori (See sections 608.501 & 608.502 F.S. to	da, if prior to registration.)
7. 761 Nepperhan Avenue	
Yonkers, New York 10703 (Street Address of	Principal Office)
8. If limited liability company is a manager-managed co	
9. The name and usual business addresses of the management	ging members or managers are as follows:
Jeffrey Weiss, managing member	ORATE O
761 Nepperhan Avenue	Σ΄΄ Ψ
Yonkers, New York 10703	
10. Attached is an original certificate of existence, no more than 90 days the jurisdiction under the law of which it is organized. (A photocopy is translation of the certificate under oath of the translator must be submit	s not acceptable. If the certificate is in a foreign language, a
11. Nature of business or purposes to be conducted or p	promoted in Florida: Buying and selling
used magnetic imaging equipment.	
Wan Ho	+
- 11 \ /1 /	deleted representative of a member.
(In accordance with section 608.408(3), F.S., the execution penalties of perjury that the facts stated herein are true.	on of this document constitutes an affirmation under the I am aware that any false information submitted in a
	third degree felony as provided for in s.817.155, F.S.)
Centey Welse	

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	Company is:		
Atlantis V	Norldwide, LLC			
If unavailable	e, the alternate to be use	d in the state of Florida is:		
2. The name		ddress of the registered agent and office are:	TALLA	*
	Aston Diaz	(Name)	CRETAR	1
	1365 NW 98 CC	,		
	Fiorida Str	eet Address (P.O. Box NOT ACCEPTABLE)	7 S	
	DORAL	FL 33172 City/State/Zip	AHII: 08	U

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)

# Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ATLANTIS WORLDWIDE, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE NINETEENTH DAY OF OCTOBER, A.D. 2011.

3510121 8300

111115032

AUTHENTY CATION: 9101900

DATE: 10-19-11

You may verify this certificate online at corp.delaware.gov/authver.shtml