# M11000006073

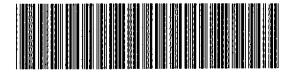
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

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DEC 5 2011

**EXAMINER** 



900214336869

NATI THE LOCAL SUFFICIENCY OF FICING

RECEIVED

DEPARTMENT OF STATE
DIVISION OF CORPORATION





ACCOUNT NO. : I2000000195

REFERENCE : 998184 4801351

AUTHORIZATION

COST LIMIT

ORDER DATE: November 30, 2011

ORDER TIME: 9:12 AM

ORDER NO. : 998184-010

CUSTOMER NO: 4801351

#### FOREIGN FILINGS

NAME: APOLLO AVE JAX LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY \_\_\_\_ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER:

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S	
L APOLLO AVE JAX LLC	
(Name of Foreign Limited Liability Company; must include	e "Limited Liability Company," "L.L.C.," or "LLC.")
(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.")	of transacting business in Florida and attach a copy of the writt ate name. The alternate name must include "Limited Liability
2. DE 3.	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 11/30/2011 5.	PERPETUAL
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. UPON FILING	•
(Date first transacted business in Flori (See sections 608.501 & 608.502 F.S. to	da, if prior to registration.) o determine penalty liability)
7. 17 BATTERY PLACE	
NEW YORK, NY 10004	
(Street Address of	Principal Office)
8. If limited liability company is a manager-managed company is a managed company is	ompany, check here
9. The name and usual business addresses of the manag	ging members or managers are as follows:
RICHMOND TUG YARD LLC	
17 BATTERY PLACE	
NEW YORK, NY 10004	
10. Attached is an original certificate of existence, no more than 90 day the jurisdiction under the law of which it is organized. (A photocopy is translation of the certificate under eath 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: REAL ESTATE
TRANSACTIONS	
/s/ Brian B.A. McCallist	er
Signature of a member or an auth	orized representative of a member.
	I am aware that any false information submitted in a third degree felony as provided for in s.817.155, F.S.)
Typed or printed n	

### 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 Co	ompany is:	
APOLLO AVE JAX LLC	77-77-77-77-77-77-77-77-77-77-77-77-77-	
If unavailable, the alternate to be used in	the state of Florida is:	
2. The name and the Florida street addre	ess of the registered agent and office are:	
Corporation Service Cor	npany	
	(Name)	
1201 Hays Street		
Florida Street	Address (P.O. Box <u>NOT</u> ACCEPTABLE)	
Tallahassee	FL 32301	
	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.

Corporation Service Company

By: Stophanie Mulnee Stephanie K. Milnes ———
Assistant Vice President

\$ 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 7

#### The First State

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

DELAWARE, DO HEREBY CERTIFY "APOLLO AVE JAX 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 SECOND DAY OF DECEMBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "APOLLO AVE

JAX LLC" WAS FORMED ON THE THIRTIETH DAY OF NOVEMBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5072504 8300

111252239

AUTHENTICATION: 9197176

DATE: 12-02-11

Jeffrey W Bullock, Secretary of State

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