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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates of	of Status
Special Instructions to	Filing Officer:	

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G. MCLEOD

MAR - 9 2012

EXAMINER



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OUVISION OF CORPORATION
TALL ANAPS CORPORATION





ACCOUNT NO. : I2000000195

REFERENCE: 123757 7249408

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ORDER DATE: March 8, 2012

ORDER TIME : 1:31 PM

ORDER NO. : 123757-005

CUSTOMER NO: 7249408

FOREIGN FILINGS

NAME: TAMPA WESTSHORE LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER:

COVER LETTER

TO:

Registration Section

JECT: TAMPA WESTSHORE LLC	Name of Limited Liability Company	
	Liability Company for Authorization to Transact Business in Florida," Certific the above referenced foreign limited liability company to transact business in F	
se return all correspondence concerning thi	s matter to the following:	
Robert Ambrosi		
	Name of Person	
TAMPA WESTSHORE	LLC	
	Firm/Company	
1401 Broad St.		
	Address	
Clifton, NJ 07013		
	City/State and Zip Code	
E-mail addres	ss: (to be used for future annual report notification)	
urther information concerning this matter,	please call:	
Name of Person	at () Area Code & Daytime Telephone Number	
MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations	
Registration Section	Registration Section	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
losed is a check for the following an \$\foxing \\$125.00 \text{ Filing Fee} \\$130.00 \text{ Filing}	Tallahassee, FL 32301 nount:	

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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. TAMPA WESTSHORE 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. 45-4725378
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. 03/07/2012 (Date of Organization) 5. perpetual (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. 1401 Broad St.
Clifton, NJ 07013
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
The latest the state of the sta
9. The name and usual business addresses of the managing members or managers are as follows:
Pohart Ambroci 1401 Broad St. Clifton NL07012
Robert Ambrosi - 1401 Broad St Clifton, NJ 07013
Marc Perel - 1401 Broad St Clifton, NJ 07013
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: Purchase and development
of commercial real estate along with leasing of commercial real estate.
2012.03.08
11:49:07 -05'00'
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 I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)
Marc Perel, Manager
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 Lim	ited Liability Compa	any is:									
TAMPA WESTSHORE	LLC										
If unavailable, the altern	ate to be used in the	e state of Florida is:									
2. The name and the Flo	orida street address (of the registered agent and office are:									
Corpora	tion Service Compa	nny									
		(Name)									
1201 Ha	ys Street										
	Florida Street Address (P.O. Box NOT ACCEPTABLE)										
Tallaha	ssee	FL 32301									
		City/State/Zip									
liability company at the p agent and agree to act in relating to the proper and obligations of my position	lace designated in th this capacity. I furth I complete performat	to accept service of process for the above sta his certificate, I hereby accept the appointm her agree to comply with the provisions of a nnce of my duties, and I am familiar with and t as provided for in Chapter 608, Florida St ny	nent as registered all statutes d accept the								
Ву:	- Stephanie Mil	Lnea Stephanie K. Milnes Assistant Vice President									
	\$ 100.00 \$ 25.00 \$ 30.00	ÿ									

\$ 5.00 Certificate of Status (optional)

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY SHORT FORM STANDING

TAMPA WESTSHORE LLC

0400477075

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 7, 2012.

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:

Robert J. Ambrosi 1401 Broad St Clifton, NJ 07013

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Certification# 123310727

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 8th day of March, 2012

6.

Andrew P Sidamon-Eristoff
State Treasurer

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