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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 8, 2012

TAMIR SHAFER 18851 NE 29 AVE. SUITE 785 AVENTURA, FL 33180

SUBJECT: THE MONTAUK GROUP, LLC

Ref. Number: W12000007750

We have received your document for THE MONTAUK GROUP, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 412A00005591

COVÉR LETTER

TO: Registration Section Division of Corporations	
SUBJECT: THE MONTAUK GROUP, LLC Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Co Existence, and check are submitted to register the above referenced foreign limited liability company to transact business	rtificate o
Please return all correspondence concerning this matter to the following:	
TAMIR SHAFER Name of Person	
THE MONTAUK GROUP, LLC Firm/Company	
18851 NE 29 AUE. SUITE 785	<i>-</i>)
AVENTURA, FL 33180 TO City/State and Zip Code	<u> </u>
E-mail address: (to be used for future annual report notification)	T
For further information concerning this matter, please call:	
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: \$\sigma \frac{1}{2}	

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1 THE MONTON GROWN LIC
1. THE MONTAUK GROUP, 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 YORK STATE (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. 3/29/2004 5. PERPETUAL (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") 6. 10/13/2011
10/12/2
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 390 PLANDOME ROAD, SUITE 209
MANHASSET, NY 11030 (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:
TNT RISING INC. 108 BARBARA RD, BELLMORE, NY 11710
HANDLEFLY INC 390 PLANDOME RD, SUITE ZOQ MANHAUST, NY 1103 NOI VENTURES INC. 1200 HARGER RD, SUITE 408, DAY BROOK IL, 6052
NOI VENTURES INC. 1200 HARGER RD, SUITE 408, DAK BROOK IL, 6052
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:
COPPORATE CONSULTING Tamin Alexander
Jamis Alyto
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.)
TAMIR SHAFER
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:	
THE MONTAUK GROUP LLC	# .
If unavailable, the alternate to be used in the state of Florida is:	
	Ļ
2. The name and the Florida street address of the registered agent and office are:	-
TAMIR SHAFER	ا الله استار الله
18851 NE 29 AUE, SUITE 7-85 Florida Street Address (P.O. Box NOT ACCEPTABLE)	
AUENTURA, FL 33180 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.

(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 York Department of State } ss:

I hereby certify, that TRILLION PROPERTIES, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 03/29/2004, and that the Limited Liability Company is existing so far as shown by the records of the Department.

A Certificate of Amendment TRILLION PROPERTIES, LLC, changing its name to ZIPPY BRANDS, LLC, was filed 04/21/2009.

A Certificate of Amendment ZIPPY BRANDS, LLC, changing its name to THE MONTAUK GROUP, LLC, was filed 11/23/2010.

The Biennial Statement is past due.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 17th day of January two thousand and twelve.

First Deputy Secretary of State

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