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COVER LETTER

	istration Section ision of Corporations					
SUBJECT:	Focus	CAMERA Name	of Limited L	ability Company		
					Fransact Business in Florida," Certificate lity company to transact business in Flori	
Please return	all correspondence cond	cerning this matte	er to the follow	ving:		
		JOSEPH	Posm	Person		
			Name of	Person		
	En	CUS CA	= P A	- 110		
		<u> </u>	Firm/Co	npany		
		105 A	1 CDONA	LD AVE .		
			Addı	ess		
		BROOKLY	IN NY	11018		
			City/State an	1/24 8 1 Zìp Code		
		~ ~ ~ ~ ~ ·	a.c			
	E-	mail address: (to	be used for fu	ture annual report n	otification)	
For further in	nformation concerning th	is matter, please	call:			
	-	.,				
	JOSEPH PO	SNER	at (& Daytime Telepho	37-8806	
	Name of F	Person	Area Code	& Daytime Telepho	one Number	
	ILING ADDRESS:		STREET AD			
	ision of Corporations istration Section		Division of C Registration S	•		
P.O	. Box 6327		Clifton Buildi	ng		
Tall	ahassee, FL 32314		2661 Executi [.] Tallahassee, F	e Center Circle L 32301		
England	a a shoot for the fall					
Enclosed/II	s a check for the foll 125.00 Filing Fee	Swing amount \$130.00 Filing I Certificate of St	Fee & □ \$	155.00 Filing Fee & Certified Copy	□ \$160.00 Filing Fee, Certificate of Status & Certified 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 R LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	EGISTER A FOR	E IG N
1 Focus Camera LLC		
(Name of Foreign Lumited Liability Company; must include "Limited Liability Company," "L.L.C.," or	"LLC.")	
Focuscam LLC	,	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach	a copy of the wr	itten
consent of the managers or managing members adopting the alternate name. The alternate name must include "Company," "L.L.C," "LLC.")	Limited Liability	•
2. New York 3 20-0493890		
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)		
4. 12/16/2003 5. Perpetual (Duration: Year limited liability company)	will owner to	
(Date of Organization) (Duration: Year infined flatinity company exist or "perpetual")	/ Will cease to	
NONE		
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		
7. 905 McDonald Are	<u>P</u>	
Brooklyn, NY 11218		TO COMPANY
(Street Address of Principal Office)	SE 2	Treation.
8. If limited liability company is a manager-managed company, check here	FG P	
9. The name and usual business addresses of the managing members or managers are as fol	F: 10	*******
SHARON SILBERSTEIN	J+-	
905 MCDONALD AVE		
Brookeyn my 11218		
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official have the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a for translation of the certificate under oath of the translator must be submitted.)		
Joseph La	•	
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 penaltics of perjury that the facts stated herein are true. I am aware that any false information subm		
document to the Department of State constitutes a third degree felony as provided for in s.81		
Joseph Plosher	•	
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:		
FOCUS CAMERA LLC		
If unavailable, the alternate to be used in the state of Florida is:		
FOCUSCAM LLC		
2. The name and the Florida street address of the registered agent and office are:		
INCORP SERVICES (Name)		
(Name)		
17888 67th COURT NORTH Florida Street Address (P.O. Box NOT ACCEPTABLE)		
LOXAHA7CHEE FL. 33470 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.

\$ 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 FOCUS CAMERA LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 12/16/2003, and that the Limited Liability Company is existing so far as shown by the records of the Department.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 19th day of December two thousand and twelve.

First Deputy Secretary of State