Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

: INCORP SERVICES INC Account Name

Account Number : I20120000007 Phone (702)866-2500 : (702)866-2689

**Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.** DOCOME Email Address:

Foreign Limited Liability Company Lakeland Cove LLC

Certificate of Status Certified Copy 1 Page Count 05 \$155.00 Estimated Charge

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B. BOSTICK

OCT 1 4 2013

EXAMINER

10/11/2013

CR2E027 (9/10)

COVER LETTER

TO: Registration Section Division of Corporation	ons ·	
SUBJECT:	Lakeland Cove LLC	
	Name of Limited Liability Company	
Existence, and check are submit	oreign Limited Liability Company for Authorization to Transact Business in Florida, ited to register the above referenced foreign limited liability company to transact business.	" Certificate of ness in Florida.
Please return all correspondence	e concerning this matter to the following:	
	Wendy Hefley	
	Name of Person	
	Ingorn Condoon Inc	
	Incorp Services, Inc.	
	Firm/Company	
	2360 Corporate Circle, Suite 400	
	Address	
	Henderson, NV 89074	
	City/State and Zip Code	
	documents@incorp.com	
	E-mail address: (to be used for future annual report notification)	•
For further information concerns	ing this matter, please call:	2013
Wendy Hefley for	Incorp Services, Inc. at 702 866-2500	7013 OCT
Name	e of Person Area Code & Daytime Telephone Number	}
MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314		M 5: 00
Enclosed is a check for the \$125.00 Filing Fee	following amount: \$\sum \\$130.00 \text{ Filing Fee & } \frac{\text{\te}\text{\texicl{\text{\texi}\text{\text{\text{\text{\texiclex{\text{\text{\texi}\text{\text{\text{	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO

	Transact Business in Florida
u	COMPLANCE WITH SECTION 603.03, FLORIDA STATUTES THE FOLLOPING IS SUBMITTED TO REGISTER A FOREIGN MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATIS OF FLORIDA: Letkeland Cove LLC (Name of Foreign Climited Liability Company; must include "Climbiad Clability Company," "LL.C." or "CLC")
×	feame unavailable, enter alternate name adopted for the purpose of transacting business in Piorids and attach a copy of the written about of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability property," "L.L.C." "(L.C.")
,	New Jersey 1 48-3584774
ï	(Jurisdivilon under the law of which foreign limited fiability (FEI number, if applicable) company is organized)
	09/03/2013 5 Perpetual
7.	(Date of Organization) (Duration: Year limited liability company will cesse to eain or "perpetual")
S .	Upon registration
	(Date first unleacted hurtness in Flands, il prior to registration.) (See seculors 608.501 & 608.502 F.S. to determine penalty liability)
,	1101 North Lake Drive, Lakewood, NJ 08701
•	
	(Street Address of Principal Office)
i.	If limited liability company is a manager-managed company, check here
١.	The name and usual business addresses of the managing members or managers are as follows:
	Managing Member-Lee Berinstein 1101 North Lake Drive, Lakewood, NJ 08701
	Managing Mamber-Aryah Stam 227 Autumn Road, Lakewood, NJ 08701

10. Attached is an original confidence of existence, no more than 90 days aid, thely authorized by the official having cusody of records in direjunisdiction 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 each of the translator must be aubmitted.)

1).	Nature of b	rusiness or pu	hores to pe couq	reteg ot busine	ted in Florida:		
1	Reel Estate	•					
						سادات ومستحدث الأروا	

Signature of a member of an authorized representative of a member.

(to accordance with section 408,408(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.)

Aryen Storn, Managing Member Typed or printed name of signes

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:		
Lakelan	nd Cove LLC		
If unavailable, the alternate to be used in the sta	ate of Florida is:		
2. The name and the Florida street address of the	he registered agen	t and office are:	
Incorp	Services, Inc.		70 20 Z
	(Name)	-	in i
17888 6	7th Court North		一部 二下
Florida Street Address	s (P.O. Box NOT ACC	EPTABLE)	· SET E
Loxahatchee	FL	33470	MY 5: 00
	City/State/Zip		- O
Having been named as registered agent and to a liability company at the place designated in this registered agent and agree to act in this capacity statutes relating to the proper and complete perfaccept the obligations of my position as registere Statutes.	certificate, I hereby. I further agree to formance of my dured agent as provided Wendy	ry accept the appoint to comply with the pr ties, and I am familia led for in Chapter 60	ment as vovisions of all ar with and

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent Certified Copy (optional)

Certificate of Status (optional)

\$ 30.00

5.00

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

LAKELAND COVE LLC

0400598317

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 September 3, 2013.

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:

Lee Berinstein 1101 North Lake Drive Lakewood, NJ 08701

OF THE STATE OF TH

Certification# 129837402

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 9th day of October, 2013

Andrew P Sidamon-Eristoff

State Treasurer

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