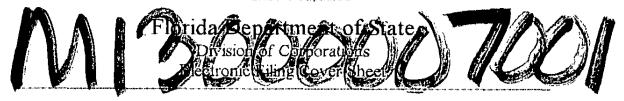
1 of !

From: Vcorp Services To: 18506176383 Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000244829 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067

Phone

: (845)425-0077

Fax Number

; (845)818-3588

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	
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Foreign Limited Liability Company NG Bellair Plaza LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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CR3E027 (9/10)

COVER LETTER

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Registration Section
Division of Corporations

SUBJECT: NG Bellair Plaza LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida...

Please return all correspondence concerning this matter to the following

Name of Person	Parameters.
Vcorp Services, LLC	
Firm/Conpany	ها حد عد له له ويشار
25 Robert Pitt Dr. Ste 204	
. Address	street said-two sea to
Monsey, NY 10952	2013 NOV
City/State and Zip Code	3 8
, gwen@vcorpservices.com	V-5
E-mail address: (to be used for future amual report notification)	CELL CO.
ner information concerning this matter, please call:	A A
Gwen Chang 310 417-1904	9: 57
Name of Person Area Code & Daytime Telephone Number	

Registration Section P.O. Box 6327 Tulinhussee, FL 32314 Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassec, FL 32301

Enclosed is a check for the following amount:

S155,00 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 6/R503 FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTRUSINESS IN THE STATE OF FLORIDA.

I NG Bellair Plaza LLC	
(Name of Foreign Limited Liability Company; must incl	ude "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpe consent of the managers or managing members adopting the alte Company," "L.L.C." "LLC.")	ose of transacting business in Florida and attach a copy of the written ernate name. The alternate name must include "Limited Liability
2. Delaware	3
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, it applicable)
₄ 10/30/2013	s. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
₆ N/A	
(Date first transacted business in F (See sections 608,501 & 608,502 F.3	lorida, if prior to registration.)
7. 1430 Broadway Suite 1605	
New York, NY 10018	
(Street Address	s of Principal Office)
8. If limited liability company is a manager-managed	
9. The name and usual business addresses of the man	naging members or managers are as follow
The Nightingale Group LLC	٠٠٠
1430 Broadway Suite 1605	
New York, NY 10018	
10. Attached is an original certificate of existence, no more than 9 the jurisdiction under the law of which it is organized. (A photoer translation of the certificate under oath of the translation must be su	Odays old, duly authenticated by the official having custody of records in opy is not acceptable. If the certificate is in a foreign language, a foreign language, a
11. Nature of business or purposes to be conducted of	r promoted in Florida:
Investments	**************************************
- UA	
	uthorized representative of a member.
(in accordance with section 608.408(3), F.S., the exe- penalties of perjury that the facts stated begin are tr	eution of this document constitutes an affirmation under the we. I am aware that any false information submitted in a
document to the Department of State constitute	s a third degree felony as provided for in s.817.155, F.S.)
Elchonon Schwartz	

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 Con NG Bellair Plaza LLC	npany is:		
If unavailable, the alternate to be used in t	he state of Florida is:	·	
2. The name and the Florida street addres	s of the registered agent and office are:	291	
Vcorp Service	es, LLC	AON EIBZ	1
	(Name)	V-5	
5011 South S	tate Road Suite 106		
Florida Street A	ddress (P.O. Box NOT ACCEPTABLE)		-
Davie	FL 33314	57	S. Mileya
	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)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "NG BELLAIR PLAZA 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 THIRTY-FIRST DAY OF OCTOBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NG BELLAIR PLAZA LLC" WAS FORMED ON THE THIRTIETH DAY OF OCTOBER, A.D. 2013.

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

5424032 8300

131252710

AUTHENT CATION: 0858827

DATE: 10-31-13

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