Florida Department of State

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13 DEC 10 PM 3: 11
SECRETARY OF STATE

Foreign Limited Liability Company WE WINDRIFT LLC

Certificate of Status	0
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C. LEWIS

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COVER LETTER

TÔ:

Registration Section
Division of Corporations

SIIBIRCT

WE Windrift 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:

Michael D. Kaplan

Name of Person

Harkavy Shainberg Kaplan & Dunstan PLC

Pirm/Company

6060 Poplar Avenue, Suite 140

Address

Memphis, TN 38119

City/State and Zip Code

mkaplan@harkavyshainberg.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, piecese call:

Michael D. Kaplan

.,901

866-5326

Name of Person

Area Code & Daytime Telephone Number

MATLING 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 Cir.

2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee & Certificate of Status

Certified Copy

□ \$160.00 Filing Fee, Certificate of Status & Certified Copy



13 DEC 10 AMID: 01

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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: WE Windrift 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. Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 4. 11/25/2013 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florids, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 12 College Road Monsey, NY 10952 (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: Israel Katz, 12 College Road, Monsey, NY 10952 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: Own apartments Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the exception of this document constitutes an affirmation under the

Typed or printed name of signee

Michael D. Kaplan

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.)

12/10/2013 16:09:46 From: To: 8506176383



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: WE Windrift LLC If unavailable, the alternate to be used in the state of Florida is:				
		C T Corporation System		
		(Name)		
		1200 South Pine Island Road		
	Florida Stre	et Address (P.O. Box NOT ACCEPTABLE)		
	Plantation	FL 33324		
		City/State/Zip		
liability comp registered ag statutes relat	pany at the place designate gent and agree to act in this ting to the proper and comp bligations of my position as	and to accept service of process for the about in this certificate, I hereby accept the apple capacity. I further agree to comply with the lete performance of my duties, and I am fair registered agent as provided for in Chapte ration System James M. Halpin	pointment as he provisions of al miliar with and	

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

Assistant Secretary

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WE WINDRIFT 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 TENTH DAY OF DECEMBER, A.D. 2013.

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

5438989 8300

131404960

You may varify this certificate online at corn deleware, quy/authyor, whimi

Juffrey W. Bullock, Secretary of State

DATE: 12-10-13