Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

(((H13000278666 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

: C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

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

Email Address:

Foreign Limited Liability Company D'Artagnan LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help



Division of Corporations Registration Section P.O. Box 6327 Tailahassee, FL 32314

December 17, 2013

To Whom It May Concern:

This letter is to notify the State of Florida, the Division of Corporations, Registration Section, that D'Artagnan Inc. gives consent to D'Artagnan, a Limited Liability Company, to the use of the name "D'Artagnan" in Florida.

Yours truly,

Andrew Werthelm

President

CR2B027 (9/10)
COVER LETTER
TO: Registration Section Division of Corporations
D'Artagnao LLC SUBJECT:
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate 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:
John O'Brien
Name of Person
D'Artagnan LLC
Firm/Company
280 Wilson Avenue
Address
Newark/New Jersey 07103
City/State and Zip Code
Johno@dartagnan.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ronnie Alagha al 973 344-0565 11, 160
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations
Registration Section Registration Section
P.O. Box 6327 Clifton Building Tallahassee, PL 32314 2661 Executive Center Circle Tallahassee, PL 32301
Enclosed is a check for the following amount:
D\$125.00 Filing Fee

(5/6)

13 DEC 19 AM 9: 35

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

IN COMPLIANCE WITH SECTION OR SIG RECORDA STATETIES THE ROLLOWING IS SERVICED TO DESIGNED A RODRICO.

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS INT	Æ	SIMTE OF FLORIDA:	
1. D'Artagnau LLC (Name of foreign Limited Liability Company) must inc	hide	"Limited Linbility Company," "L.L.C." or "L.L.C.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Plorida and attack 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 Jersey	3.	46-2578072	
(Jurisdiction under the law of which foreign limited liability company is organized)	•	(FBI number, if applicable)	
4. April 16, 2013	5.	Perpetual	
(Deta of Organization)		(Duration: Year limited liability company will coase to exist or "perpetual")	
6. Subsequent to December 31, 2013			
(Dats) first transacted business in f (See sections 608.501 & 608.502 F.	kui S. i	da, lf.prior to:negistrátion.) zdatermine penalty linbility)	
7. 280 Wilson Avenue, Newark, NJ 07105			
(Street Addres	58 O	Principal Office)	
8. If limited liability company is a manager-manage	d c	ompany, check here	
, , , , , , , , , , , , , , , , , , , ,			
9. The name and usual business addresses of the ma	nag	ing members or managers are as follows;	
Ariane Daguin - Member			
280 Wilson Avenue, Newark, NJ 07105			
		· · · · · · · · · · · · · · · · · · ·	
			
10. Attached is an original certificate of existence, no more than 9 the jurisdiction under the law of which it is organized. (A photoc translation of the certificate under oath of the translator must be st	ору		
11. Nature of business or purposes to be conducted		•	
·	•		
Signature of Emerylar or an a	rith	orized representative of a member.	
(In accordance with section 602.403/3), F.S., the sec	eouti	og of this document constitutes an affirmation under the	
penalties of perjury that figs skeps stated herein are t	true.	I em aware that any faiss information submitted in a third degree felony as provided for in s.817.155, F.S.)	
John O'Brien - Chief Financial Offi		ente neftres terettà us bioestien tot tit got 1,1122 (1921)	
Typed or printe	ed n	ame of signee	

APPROVEL AND FILED

(4/6)

13 DEC 19 AM 9: 35

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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.

I. The name of the Limited Liability Company is: D'Artagnan LLC If unavailable, the alternate to be used in the state of Plorida is:						
		C T Corporation System				
		(Namo)				
	1200 South Pine Island Road					
		Plorida Street Address (P.O. Box NOT ACCEPTABLE)				
	Plantation	FI, 33324				
	,	City/State/Zip				
liability cor registered d statutes reli	npany at the place igent and agree t ating to the prop	stered agent and to accept service of process for the above stated limited ce designated in this certificate, I hereby accept the appointment as to act in this capacity. I further agree to comply with the provisions of all er and complete performance of my duites, and I am familiar with and position as registered agent as provided for in Chapter 608, Florida				
	Ву:	CT Corporation System Joan Tologo Assistant Secretary (Signature)				
		\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)				

12/19/2013 13:35:00 From: To: 8506176383

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

D'ARTAGNAN LLC

0600398318

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 April 16, 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:

Andrew Wertheim 280 Wilson Avenue Newark, NJ 07105

OF THE STATE OF TH

Certification# 130569644

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 18th day of December, 2013

Andrew P Sidamon-Eristoff
State Treasurer

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