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(City/State/Zip/Phone #)

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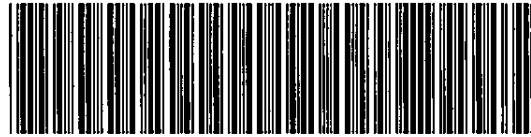
(Business Entity Name)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 30, 2014

ALLAN SULLIVAN
1700 BROADWAY 28TH FL
NEW YORK, NY 10019

SUBJECT: SULLIVAN RUVOLDT PLLC
Ref. Number: W14000006356

We have received your document for SULLIVAN RUVOLDT PLLC and your check(s) totaling \$250.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 114A00002139

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SULLIVAN RUVOLDT PLLC
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:

ALLAN J. SULLIVAN

Name of Person

SULLIVAN RUVOLDT PLLC

Firm/Company

1700 BROADWAY, 28TH FLOOR

Address

NEW YORK, N.Y. 10019

City/State and Zip Code

ASULLIVAN@SULLIVANRUVOLDT.COM

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

For further information concerning this matter, please call:

ALLAN SULLIVAN

Name of Contact Person

at (212)

Area Code

706-1850

Daytime Telephone Number

MAILING 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 Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Sullivan Ruvoiot D.L.L.C. Limited Liability Company
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Sullivan and Ruvoiot L.L.C. Limited Liability Company
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. New York State 3. NA
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. Exact date unknown December 10, 2013?
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 701 Brickell Avenue
Suite 1550, Miami, Florida 33131, USA
(Street Address of Principal Office)

6. 701 Brickell Avenue, Suite 1550, Miami, Florida 33131
United States
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

MGRM Allan Sullivan, Linda Sullivan MGRM

8. 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)

Ali Ali

Signature of an authorized person

(In accordance with section 605.0203, 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.)

Marcel Miranda

Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:

Sullivan Ruvoit + P.L.L.C. Limited Liability Company

If unavailable, the alternate to be used in the state of Florida is:

Sullivan and Ruvoit + P.L.L.C. Limited Liability Company

2. The name and the Florida street address of the registered agent and office are:

Sullivan Ruvoit +
(Name)
701 Brickell Avenue, Suite 1550
Florida Street Address (P.O. Box NOT ACCEPTABLE)
MIAMI, Florida, 33131 FL
City/State/Zip

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SECRETARY OF STATE

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 605, Florida Statutes.

Rich
(Signature)

\$ 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 SULLIVAN RUVOLDT PLLC a NEW YORK Professional Service Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 12/03/2013, and that Professional Service Limited Liability Company is existing so far as shown by the records of the Department.



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*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 21st day of January two
thousand and fourteen.*

Anthony Giardina

Executive Deputy Secretary of State