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.

(((H14000121535 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:

: GERALD WEINBERG, P.C. Account Name

Account Number: I20030000043

: (800)342-9856

Phone Fax Number

: (800) 354-3381

**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 INTEGRATED AUDIO VIDEO & CONTROL LLC

Certificate of Status	0		
Certified Copy	0		
Page Count	03		
Estimated Charge	\$125.00		

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

N. Gumpan MAY 2 3 2014 5/22/2014

ထု

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:

I. INTEGRATED AU	DIO VIDEO &			ue of reord	A:
(Name of Foreign Li	mited Liability Compan	y; must include "Lir	nited Liability Comp	eany,""L.L.C.," or	"LLC.")
(If name unavailable, enter alternate Liability Company," "L.L.C," or "I	e name adopted for the p .L.C.")	purpose of transaction	ng business in Florid	a. The alternate nan	ne must include "Limited
2. NEW YORK		3. 20	3-3525848	}	
(Jurisdiction under the law of we company is organized)	ich foreign limited liab	ility	(FEI	number, if applicat	ile)
4	A				38
	(Date first transacted (See sections 605,0904	business in Florida & 605.0905, F.S. to	if prior to registration determine penalty li	on.) ability)	
s. 60 MARBLEDA	LE ROAD	 _			- Sealer Z
TUCKAHOE, N	Y 10707				in C
6. 60 MARBLEDA	•	reet Address of Prin	cipal Office)		STAT
TUCKAHOE, N	IY 10707		,		- 3 H
		(Mailing Addr	css)		
7. The name, title or capa	city and address o	of the person(s)	who has/have a	uthority to ma	nage is/are:
BRIAN ARDITI, N	MANAGING	MEMBEF	<u> </u>		
247 WESTCHES	TER AVEN	UE, YONK	ERS, NY	10707	
				· · · · · · · · · · · · · · · · · · ·	
B. Attached is an original contains a custody of records in acceptable. If the certificate must be submitted)	n the jurisdictions e is in a foreign la Signa	rander the law onguage, a tracks	of which it is or lation of the cer	ganized. (A ph tificate under	otocopy is not oath of the translator
In accordance with section 605.0203, F on aware that any false information sub	.S., the execution of this de	ocument constitutes ar	Affirmation under the	penalties of perjury the following as provided	at the facts stated herein are true for in 5,817,155, F.S.)
BF	RIAN ARDIT	T ,			

CH140001215353)

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.

AGENT IN THE STATE OF FLORIDA.	*****
1. The name of the Limited Liability Company is:	
INTEGRATED AUDIO VIDEO & CONTROL LLC	

If unavailable, th	e alternate to be used in the st	tate of Florida is:	
2. The name and	the Florida street address of	the registered agent and office ar	e: ALCOHOL TO
	INCORPORATIN	IG SERVICES, LTI	D. ASSEE. P. ASSEE. P. D.
	1540 GLENWAY Florida Street Addres	DRIVE ss (P.O. BOX NOT ACCEPTABLE)	8: 27
•	TALLAHASSEE	32301	

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.

City/State/Zlp

distributed Storge Assistant Secretary (Signature)

CH140001215353)

State of New York Department of State } ss:

I hereby certify, that INTEGRATED AUDIO VIDEO & CONTROL LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 10/07/2008, and that the Limited Liability Company is existing so far as shown by the records of the Department.



201405220141 - 13

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

Anthony Giardina

Executive Deputy Secretary of State