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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE

OCT 2 1 2014 T. HAMPTON

#### COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: JP 91	me of Limited Liability Company
144	and of Limited Liability Company
	ability Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this n	natter to the following:
Sunshine Corporate Services, Inc.	
3458 Lakeshore Driv Tallahassee, FL 3231	Firm/Company
	Address
	City/State and Zip Code
	0.ty,0.1.1.2
F-mail address	ss: (to be used for future annual report notification)
For further information concerning this matter, ple	,
To further information concerning this matter, pre	ass can.
Time	850, 508 1891
Name of Contact Person	Area Code Daytime Telephone Number
MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations
Registration Section	Registration Section
P.O. Box 6327	Clifton Building
Taliahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amo	
Certificate	

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

IN COMPLIANCE WITH SECTION 603.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1 JP 910 LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.") (If name unavailable, enter attenuate name adopted for the purpose of transacting business in Florida, The alternate name arost facinds "Limited Liability Company," "L.L.C." or "LLC.") 2 New York (Jurisdiction under the law of which foreign limited liability company is organized) 4. Upon Filing (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty limbility) 455 Central Park Avenue Scarsdale, NY 10583 (Street Address of Principal Office) 6 455 Central Park Avenue Scarsdale, NY 10583 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are Joshua Goldberg, Manager 1 North Broadway White Plains, NY 10601 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) Signature of an authorized person (In accordance with section 603,0203, F.S., the execution of this document constitutes an affirmation under the ponalties of perjusy that the floits stated havein use true. I am aware that any false information rebmitted in a document to the Department of State constitutes a third degree follows as provided for in a.817.155, F.S.) Joshua Goldberg

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.

If unavailable, the alternate to be used in the state of Florida is:				
2. The name and the Florida street address of the registered agent and office are:				
	United Corpo	orate Services, Inc.		
	<u>-</u>	(Name)		
	9200 South	Dadeland Blvd Suite 508		
	Florida Str	eet Address (P.O. Box NOT ACCEPTABLE)		
	Miami	FL 33158		
	***************************************	City/State/Zip		
liability compregistered as	pany at the place designativent and agree to act in thi	t and to accept service of process for the above stated limited ed in this certificate, I hereby accept the appointment as s capacity. I further agree to comply with the provisions of all plete performance of my duties, and I am familiar 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)

## State of New York Department of State State

I hereby certify, that JP 910 LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 10/04/2010, and that the Limited Liability Company is existing so far as shown by the records of the Department. I further certify the following:

A Certificate of Publication of JP 910 LLC was filed on 12/22/2010.

A Biennial Statement was filed 06/20/2013.

I further certify, that no other documents have been filed by such Limited Liability Company.



Witness my hand and the official seal of the Department of State at the City of Albany, this 17th day of October two thousand and fourteen.

Anthony Giardina

**Executive Deputy Secretary of State** 

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