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COVER LETTER

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TO: Registration Section Division of Corporations
SUBJECT: Route 88 Brick NJ 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:
Name of Person T Will
Sunshine Corporate & Filing Services, Inc. 3458 Lakeshore Drive Tallahassee, FL 32312 Firm/Company Tallahassee, FL 32312
Address
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
For further information concerning this matter, please call: at (850) 508 189 2
Name of Contact Person Area Code Daytime Telephone Number
Name of Contact Person Area Code Daytime Telephone Number MAILING ADDRESS: STREET ADDRESS: Division of Corporations Registration Section Registration Section
Registration Section Registration Section
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\Begin{array}{cccccccccccccccccccccccccccccccccccc

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. Route 88 Brick NJ LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC." or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limit Liability Company," "L.L.C," or "LLC.")	ted
New York	
(Jurisdiction under the law of which foreign limited liability (Pfil number, if applicable) 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 penelty liability)	
_{5.} 1 North Broadway	
White Plains, NY 10601	
(Streat Address of Principal Office)	
6. 1 North Broadway	2814
White Plains, NY 10601	1007
(Mailing Address)	120
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are	
Joshua Goldberg, Manager	OCT 20 AM 9:
1 North Broadway	9: 02
White Plains, NY 10601	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the officence of the certificate is in a foreign language, a translation of the certificate under oath of the translation of the certificate under oath of the translation of the submitted) Signature of an authorized passon (In accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penalties of parjury that the them stated bend an authorized passon (In accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penalties of parjury that the them stated bend an average that any false information submitted in a document to the Department of State constitutes a third degree (clearly as provided for in a \$17.155, F.S.) Joshua Goldberg Typed or printed name of signes	lator

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 Route 88 Brick NJ LL	• •			
If unavailable, the alternate to be use	ed in the state of Florida is:			
2. The name and the Florida street a	ddress of the registered agent and office are:	11 The second	2014	
United Corp	porate Services, Inc.		M OCT	Sta (4)
	(Name)		1 20	
9200 South	n Dadeland Blvd Suite 508	198 1980 1980	AH	(T
Florida S	itroet Address (P.O. Box NOT ACCEPTABLE)		و ٦	
Miami	FI. 33156	当然	02	
	City/State/Zip			

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.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

5 5.00 Certificate of Status (optional)

State of New York Department of State State | State

I hereby certify, that ROUTE 88 BRICK NJ LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 04/01/2009, 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 ROUTE 88 BRICK NJ LLC was filed on 06/08/2009.

A Biennial Statement was filed 05/05/2011.

A Biennial Statement was filed 04/26/2013.

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

OF NEW

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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