

M14000009057

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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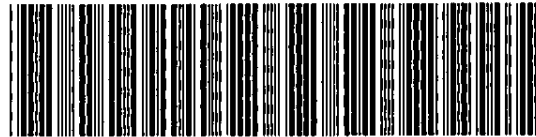
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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## COVER LETTER

WALK IN

ENTITY NAME: Sterling Barwis

CK # 1452

Methods  
LLC

AMOUNT: 155<sup>00</sup>

PLEASE FILE THE ATTACHED AND RETURN:

☐ PLAIN COPY

☒ CERTIFIED COPY

PLEASE CONTACT TINA AT 850-508-1891 FOR  
FURTHER INFORMATION ON THIS MATTER.

THANK YOU!

TINA GOFF, PRESIDENT

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14 DEC 17 01:31:18  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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

**IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A  
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:**

1. Sterling Barwis Methods LLC

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

(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

(Jurisdiction under the law of which foreign limited liability company is organized)

3. \_\_\_\_\_

(FBI number, if applicable)

4. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 111 Great Neck Road, Suite 408, Great Neck, NY 11021

(Street Address of Principal Office)

6. 111 Great Neck Road, Suite 408

Great Neck, NY 11201

(Mailing Address)

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

Jeffrey Wilpon, Manager

111 Great Neck Road, Suite 408, Great Neck, NY 11021

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)

Gregory P. Nero

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, and 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.)

Gregory P. Nero

Typed or printed name of signee

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FLORIDA  
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**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:  
STERLING BARWIS METHODS LLC

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 Corporate Services, Inc.**

(Name)

**9200 South Dadeland Blvd.- Suite 508**

Florida Street Address (P.O. Box NOT ACCEPTABLE)

**Miami**

**FL**

**33156**

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.*



(Signature)

**MICHAEL A. BARR - PRESIDENT**

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

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14 DEC 17 11 31 AM  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**State of New York  
Department of State } ss:**

I hereby certify, that **STERLING BARWIS METHOD LLC** a **NEW YORK** Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 11/25/2014, and that the Limited Liability Company is existing so far as shown by the records of the Department.

A Certificate of Amendment **STERLING BARWIS METHOD LLC**, changing its name to **STERLING BARWIS METHODS LLC**, was filed 11/28/2014.



\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 16th day of December  
two thousand and fourteen.*

*Anthony Giardina*

Anthony Giardina  
Executive Deputy Secretary of State

201412170354 • 37

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14 DEC 17 PM 3:19  
SECRETARY'S OFFICE  
ALBANY, NEW YORK