

01/28/2015

07:22

TO:18506176383 FROM:7183069258

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M15000020707

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : PREMIER CORPORATE SERVICES LLC  
Account Number : 120140000110  
Phone : (718) 317-9727  
Fax Number : (718) 306-9258

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: arlene@premiercfs.com

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15 JAN 28 AM 10:00

DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

Foreign Limited Liability Company  
243 NW 27 LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

2015 JAN 28 AM 8:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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JAN 29 2015  
J. HARRIS

01/28/2015 17:03:22

TO: 11/25/09 07:53:32 25 FEB 2011 18:46:25 81/001 Fax Server 2



January 27, 2015

FLORIDA DEPARTMENT OF STATE

PREMIER CORPORATE SERVICES LLC

Division of Corporations

SUBJECT: 243 NW 27 LLC  
REF: W15000005737

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return 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.

Jenna D Harris  
Regulatory Specialist II

FAX Aud. #: H15000020707  
Letter Number: 915A00001616

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15 JAN 28 AM 10:00  
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BUREAU OF COMMERCIAL  
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TALLAHASSEE, FLORIDA

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**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. 243 NW 27 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. \_\_\_\_\_

(FEI 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. 45 Main Street, Suite 502Brooklyn, NY 11201

(Street Address of Principal Office)

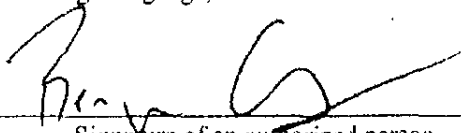
6. c/o Abingdon Square Partners45 Main Street, Suite 502, Brooklyn, NY 11201

(Mailing Address)

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

Benjamin Atkins , Authorized Memberc/o Abingdon Square Partners45 Main Street, Suite 502, Brooklyn, NY 11201

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 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.)

Benjamin Atkins

Typed or printed name of signee

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SECRETARY OF STATE  
TALLAHASSEE, 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:

**243 NW 27 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:

**Corporate Creations Network Inc.**

(Name)

**11380 Prosperity Farms Road #221E**

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

**Palm Beach Gardens**

**FL**

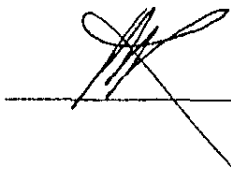
**33410**

City/State/Zip

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TALLAHASSEE, FLORIDA

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*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.*



**Michael Reinhold, Vice President**

(Signature)

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

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I hereby certify, that 243 KENT REALTY LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 04/10/2012, and that the Limited Liability Company is existing so far as shown by the records of the Department.

A Certificate of Amendment 243 KENT REALTY LLC, changing its name to 243 NW 27 LLC, was filed 01/21/2015.



\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 22nd day of January  
two thousand and fifteen.*

*Anthony Giardina*

Anthony Giardina  
Executive Deputy Secretary of State

201501230402 \* PT

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