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PINE ISLAND POOH, LLC

TYPE OF FILING: APPLICATION

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AUTHORIZATION: ABBIE/PAUL HODGE

#### **COVER LETTER**

TO:	Registration Section Division of Corporation	าร						
	Р	NE ISLAND	POOH, LLC					
SUBJI	ECT:		Liability Company		<del></del>			
The en	iclosed "Application by Fo	reign Limited Liability Compa ad to register the above refered	any for Authorization to Tranced foreign limited flubility	ansact Business in Florida y company to transact bus	" Certificate of iness in Florida			
Please	return all correspondence	concerning this matter to the f	ollowing:					
	Joseph	J. Giamboi						
			ne of Person		-			
	MANHA	TTAN SKYLIN	E MANAGEN	IENT CORP.				
		Fin	n/Company	# latin de la language <u>grande que per</u> # A de la latin de la latin de la companse que la companse que la companse q	•			
	101 WEST 55th St.							
			Address		•			
	New York, New York 10019							
		City/Sta	ite and Zip Code		•			
	Jgiamb	oi@mskyline.						
		E-mail address: (to be used	for future annual report notific	ation)	<b></b>			
For fu	rther information concernir	g this matter, please call:						
	Joseph J.	Giamboi	212 ,408	3-9461	_			
	Name	of Contact Person	Area Code Dr	ytime Telephone Number				
	MAILING ADDRESS: Division of Corporation Registration Section P.O. Box 6327 Tullahassee, FL 32314	Division Registral Clifton F 2661 Ex	T ADDRESS: of Corporations lion Section Building ccutive Center Circle sec, FL 32301		18. <b>5</b>			
Enclo	nsed is a check for the							
	☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy	国 \$160.00 Filing Fee, of Status & Cortifled				

### 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:

FOREIGN LIMITED LIABILITY COMPAN. PINE ISLAND POOH, LLC	Y TO TRANSACT BUSINESS IN THE ST	ATE OF FLORIDA:	
	Company; must metade "Limited Liability Com	pany," "L.L.C.," or "LL	J.")
f name unavailable, enter afternate name adopted iability Company," "L.L.C," or "LLC.")	for the purpose of transacting business in Flori	da. The electriate name in	nust include "Limited
DELAWARE	<sub>3.</sub> 47-361368		
(Jurisdiction under the law of which foreign limi company is organized)	ted liability (FE	I number, if applicable)	
None			
(Date first tra (See sections 60	insacted business in Florida, if prior to registral 5.0904 & 605.0905, F.S. to determine penalty	ion.) liability)	
101 WEST 55th St.			,
New York, New York 1	0019		
	(Street Address of Principal Office)		· · · · · · · · · · · · · · · · · · ·
c/o MANHATTAN SKY	LINE MANAGEMENT	CORP.	
101 WEST 55th St.	New York,	N.Y.	10019
101 WEST 55th St.	New York,	N.Y.	10019
. Attached is an original certificate of aving custody of records in the jurisd ecceptable. If the certificate is in a fore tast be submitted)	iction under the law of which it is o	rganized. (A photo	copy is not
n accordance with section 605 0203, F.S., the execution	Signature of an authorized person of this document constitutes an affirmation under the	or penalties of perjury that t	ne facts stated herein pre-
n accordance with section 605 0203, F.S., the execution aware that any false information submitted in a docum	Signature of an authorized person of this document constitutes an affirmation under the nent to the Department of State constitutes a third de	or penalties of perjury that t	ne facts stated hereinfare
n accordance with section 605 0203, F.S., the execution in aware that any false information submitted in a document of the section of the sec	Signature of an authorized person of this document constitutes an affirmation under the near to the Department of State constitutes a third do Giamboi	or penalties of perjury that t	ne facts stated herein pre-
a accordance with section 605 0203, F.S., the execution aware that any false information submitted in a document of the section of the sectio	Signature of an authorized person of this document constitutes an affirmation under the nent to the Department of State constitutes a third de	or penalties of perjury that t	ne facts stated hereinfare in s \$17255, P.S.)
n accordance with section 605 0203, F.S., the execution is aware that any false information submitted in a document of the section of the sec	Signature of an authorized person of this document constitutes an affirmation under the near to the Department of State constitutes a third do Giamboi	or penalties of perjury that t	ne facts stated hereinfare in s \$17255, P.S.)

## 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.

	of the Limited Liability Co SLAND POOH, I					
If unavailable	e, the alternate to be used in	the state of Florida is:				
2. The name	and the Florida street addre	ss of the registered agent and office are:				
	NRAI Services, Inc.					
	(Name)					
	1200 South Pine Island Road					
	Florida Street Address (P.O. Box NOT ACCEPTABLE)					
	PLANTATION	FL 33324				
	City/State/Zip					
Having heen i	ramed as revistered agent a	nd to accept service of process for the above	stated limited			

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)

Signature)

Secretarian AROL GLOSPIE

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

# Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "PINE ISLAND POOH, LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE SIXTH DAY OF APRIL, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PINE ISLAND POOH, LLC" WAS FORMED ON THE FOURTH DAY OF MARCH, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

THE FILED TO SE

5703689 8300

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Jeffrey W. Bullock, Secretary of State AUTHENTYCATION: 2264242

DATE: 04-06-15

at corp.delaware.gov/authver.shtml