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Florida Department of State
Division of Corporations
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Email Address: myer53@verizon.net

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FLORIDA LIMITED LIABILITY CO.
John Myer Retirement Account Limited Liability Company

Certificate of Status	1
Certified Copy	0
Page Count	05
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1. Burch APR 27 2015

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April 24, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

HUBCO

SUBJECT: JOHN MYER RETIREMENT ACCOUNT LLC
REF: W15000028772

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.

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

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tim Burch
Regulatory Specialist II

FAX Aud. #: H15000099739
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INFORMATION SERVICES

P.O BOX 6327 - Tallahassee, Florida 32314

H15000100468

**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. John Myer Retirement Account Limited Liability Company

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

2. New Jersey

(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. 519 Van Buren Street, Ridgewood, NJ 07450**

(Street Address of Principal Office)

6. 519 Van Buren Street, Ridgewood, NJ 07450

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:John Myer, Managing Member, 519 Van Buren Street, Ridgewood, NJ 07450

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.)

John Myer

Typed or printed name of signee

H15000100468

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

H15000100468

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:

John Myer Retirement Account Limited Liability Company

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:

Kenneth Bruno

(Name)

248 South West 47 Street

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

Cape Coral

FL

33914

City/State/Zip

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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.



(Signature)

Kenneth Bruno

H15000100468

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

JOHN MYER RETIREMENT ACCOUNT LIMITED LIABILITY COMPANY

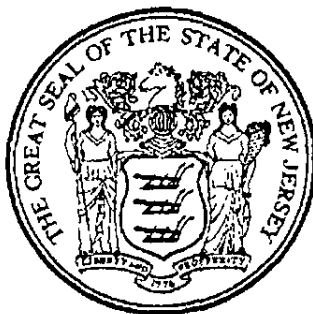
0400701241

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on November 10, 2014.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

*John P. Myer
519 Van Buren Street
Ridgewood, NJ 07450*



Certification# 136023041

*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed my
Official Seal at Trenton, this
22nd day of April, 2015*

A handwritten signature in black ink, appearing to read "Andrew P. Sidamon-Eristoff".

*Andrew P. Sidamon-Eristoff
State Treasurer*

Verify this certificate at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp

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