

MFO0000678
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000206205 3)))



H150002062053ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)205-8842
Fax Number : (850)878-5368

FILED
15 AUG 26 PM 3:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: _____

RECEIVED
15 AUG 26 PM 1:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**Foreign Limited Liability Company
Lerner New York Outlet, LLC**

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

*
Please
File 2nd
after
H15000206198
*

AUG 27 2015

Electronic Filing Menu Corporate Filing Menu **S. YOUNG** Help

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Lerner New York Outlet, 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:

Thomas V. Magaldi

Name of Person

Lerner New York Outlet, Inc.

Firm/Company

330 West 34th Street, 6th Floor

Address

New York, NY 10001

City/State and Zip Code

tmagaldi@nyandcompany.com

E-mail address: (to be used for future annual report notification)

15 AUG 26 PM 3:27
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Thomas V. Magaldi

212

884-2130

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Cillian Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee &
Certificate of Status

\$155.00 Filing Fee &
Certified Copy

\$160.00 Filing Fee, Certificate
of Status & Certified Copy

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. Lerner New York Outlet, 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 "Limited Liability Company," "L.L.C.," or "LLC.")

2. Massachusetts (Jurisdiction under the law of which foreign limited liability company is organized) 3. 04-2526617 (FBI number, if applicable)

4. 08-07-2015 (Date first transacted business in Florida, if prior to registration. (See sections 605.0904 & 605.0905, F.S. to determine penalty liability))

5. 330 WEST 34th STRBET, 6th Floor, NY, NY 10001 (Street Address of Principal Office)

6. 330 WEST 34th STRBET, 6th Floor, NY, NY 10001 (Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System Office Address: 1200 South Pine Island Road Plantation, Florida 33324 (City) (Zip code)

Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: Debbie Diaz (Registered agent's signature) Assistant Secretary

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Sheamus Teal - CFO 330 West 34th St New York, NY 10001 Chris Consi - VP Controller 330 West 34th St New York, NY 10001 Adam Retner - Secretary 330 West 34th St. New York, NY 10001

9. Attached is a 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. (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)

This document is executed in accordance with section 605.0203 (1)(b), Florida Statutes. 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.

Sheamus Teal (Typed or printed name of signee)

FILED 15 AUG 26 PM 3:27 SECRETARY OF STATE DEPARTMENT OF STATE



The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02188

William Francis Galvin
Secretary of the
Commonwealth

August 21, 2015

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

LERNER NEW YORK OUTLET, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on August 7, 2015.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: **NONE**

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: **CHRIS CONSI, SHEAMUS TOAL, ADAM RATNER**

The names of all persons authorized to act with respect to real property listed in the most recent filing are: **CHRIS CONSI, SHEAMUS TOAL, ADAM RATNER**



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Francis Galvin
Secretary of the Commonwealth

FILED
15 AUG 26 PM 3:27
SECRETARY OF STATE
TULLAHASSEE, FLORIDA