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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

1. 4.

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TO SEP 18 AH III 48

2015 SEP 18 AH 8: 56

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I20000000195 REFERENCE 786629 11663B AUTHORIZATION : \$ 125.00				
ORDER DATE : September 16, 2015				
ORDER TIME : 3:54 PM				
ORDER NO. : 786619-005				
CUSTOMER NO: 11663B				
FOREIGN FILINGS NAME: 96 DAY LILY LANE LLC				
XXXX QUALIFICATION (TYPE: LL)				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING				

EXAMINER:

CONTACT PERSON: Courtney Williams -- EXT# 62935

COVER LETTER

SUBJECT	G: 96 DAY LILY LANE LLC	
		me of Limited Liability Company
		bility Company for Authorization to Transact Business in Florida," Certificate of bove referenced foreign limited liability company to transact business in Florida
Please retu	urn all correspondence concerning this ma	atter to the following:
	Jane C. Rankin, Esq.	
		Name of Person
	Kubicki Draper	
		Firm/Company
	1 East Broward Boulevard	
		Address
	Ft. Lauderdale, FL 33301	
		City/State and Zip Code
	rjmcrory@mcroryandmcory.cor	
	E-mail address:	(to be used for future annual report notification)
For further	r information concerning this matter, plea	ase call:
J	lane C. Rankin, Esq.	. 954 \ . 768-0011
	Name of Person	Area Code Daytime Telephone Number
T R P	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Fallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
	d is a check for the following amount of the state of the following amount of the state of the	ng Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate

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-96 DAY LILY LANE 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 and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") 2. New York (Jurisdiction under the law of which foreign limited liability (PEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5. 11 North Pelican Drive Key Largo, FL 33037 (Street Address of Principal Office) 6. c/o McRory and McRory, P.LLC. 124 Cherry Valley Avenue, Garden City, NY 11530 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: John Burns (MANAGER) c/o McRory and McRory, P.L.L.C 124 Cherry Valley Avenue, Garden City, NY 11530 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 gash 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 perjary 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 Burns , Manager

Typed or printed name of signee

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.

(Signature)

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

5.00 Certificate of Status (optional)

Kubicki Drape

Jane C. Rankin, Esq.

By:

1. The name	e of the Limited Liability Co	ompany is:	
96 DAY LILY	LANE LLC		
If unavailabl	le, the alternate to be used in	the state of Florida is:	
2. The name	e and the Florida street addr	ess of the registered agent and office are:	
	Kubicki Draper		2815
		一路 五	
	1 East Broward Boulevar		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	Ft. Lauderdale	FL 33301	(1) (A) (A) (A) (A) (A) (A) (A) (A) (A) (A
		City/State/Zip	55
liability com registered as statutes rela	pany at the place designated gent and agree to act in this ting to the proper and compi	and to accept service of process for the above s I in this certificate, I hereby accept the appoints capacity. I further agree to comply with the pr lete performance of my duties, and I am familia registered agent as provided for in Chapter 60.	ment as rovisions of all ar with and

State of New York Department of State State

I hereby certify, that 96 DAY LILY LANE LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 04/20/2012, and that the Limited Liability Company is existing so far as shown by the records of the Department.



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Witness my hand and the official seal of the Department of State at the City of Albany, this 15th day of September two thousand and fifteen.

Anthony Gardina

Duting Sicidina

Executive Deputy Secretary of State