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Office Use Only



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OCT 0 6 2015 Y SULKER CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 759211 7562834

AUTHORIZATION : Smell blen

COST LIMIT : \$/1\25.00

ORDER DATE: August 25, 2015

ORDER TIME : 3:27 PM

ORDER NO. : 759211-030

CUSTOMER NO: 7562834

FOREIGN FILINGS

NAME: NLA REAL ESTATE SERVICES LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

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:

| Liability Company," "L.L.C | alternate name adopted for the pu | rpose of transacting busine | ess in Florida. The alternate na | ne must include "Limited |
|---|--|--|--|--|
| 2 DELAWARE | , , | 2 | | |
| | v of which foreign limited liabilit | у 3 | (FEI number, if applicable |) |
| 4 | | | | _ |
| | (Date first transacted by (See sections 605.0904 & | usiness in Florida, if prior t 605.0905, F.S. to determin | to registration.) ne penalty liability) | _ |
| 5. 6901 JERICHO TUR | NPIKE, SUITE 210 | | | _ |
| SYOSSET, NY 11791 | | | | |
| | (Street Address | s of Principal Office) | | |
| 6. 6901 Jericho Turn | pike, Suite 210 | | | _ |
| Syosset, NY 11791 | 1 | | | _ |
| | (Mail | ing Address) | | |
| 7. Name and street addre | ss of Florida registered agent: | (P.O. Box NOT accep | table) | |
| Name: | Corporation Service Compa | any | <u> </u> | ·Fa - |
| Office Address: | 1201 Hays Street | | | 50.00 |
| | Tallahassee | | _ , Florida <u>32301</u> | Fig. 7 |
| Registered agent's accep | (City |) | (Zip code) | SSS |
| Having been named as re this application, I hereby with the provisions of all | egistered agent and to accept accept the appointment as re statutes relative to the proper ition as registered agent. Corporation Service Com By: | egistered agent and agre r and complete perform | ne to act in this capacity. I fance of my duties, and I an Melissa Z | further agreeds comply) in familiar with and accept condition ender |
| | acity and address of the person | n(s) who has/have author | rity to manage is/are: | |
| 8. The name, title or capa | | Turnníka Cuita 110 | Syosset, NY 11791 | |
| 8. The name, title or capa Eric Fein, managing | member, 6901 Jericho | Turnpike Suite 210 | | |
| Eric Fein, managing | member, 6901 Jericho ´ | = | • | |

Typed or printed name of signee

ERIC FEIN

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "NLA REAL ESTATE SERVICES 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 SEVENTEENTH DAY OF SEPTEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NLA REAL ESTATE SERVICES LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF OCTOBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 10077979

Date: 09-17-15