

11/10/15 11:42 FAX GUNSTER, YOAKLEY & STEWART, P.A. 0003005  
**N15000009937**

Florida Department of State  
Division of Corporations  
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*Thank you.*

**To:**

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**From:**

Account Name : GUNSTER, YOAKLEY & STEWART, P.A.  
Account Number : 076117000420  
Phone : (561) 650-0728  
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Foreign Limited Liability Company  
**Z LIFESTYLE LLC**

Certificate of Status	1
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Page Count	02
Estimated Charge	\$130.00

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December 11, 2015

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

GUNSTER, YOAKLEY & STEWART, P.A.

SUBJECT: Z LIFESTYLE LLC  
REF: W15000079866

PLEASE FILE USING SUBMISSION DATE OF DECEMBER 10, 2015. THANK YOU.

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.

According to section 605.0902, Florida Statutes, the application for Certificate of Authority must be made on the forms prescribed and furnished by the Department of State. Therefore, your application is being returned and the correct form is enclosed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Karen A Saly  
Regulatory Specialist II

FAX Aud. #: E15000291870  
Letter Number: 615A00025936

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TALLAHASSEE, FLORIDA

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**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. Z LIFESTYLE 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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. DELAWARE

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 46-1407075

(FEI number, if applicable)

4. UPON REGISTRATION

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

5. 250 S AUSTRALIAN AVENUE, SUITE 1600, WEST PALM BEACH, FLORIDA 33401

(Street Address of Principal Office)

6. 250 S AUSTRALIAN AVENUE, SUITE 1600, WEST PALM BEACH, FLORIDA 33401

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)Name: GY CORPORATE SERVICES, INC.Office Address: 600 BRICKELL AVENUE, SUITE 3500

MIAMI, Florida 33131  
(City) (Zip code)

**Registered agent's acceptance:**

*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 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.*

GY CORPORATE SERVICES, INC

/s/ William J. Hyland

By:

(Registered agent's signature) William J. Hyland, Vice President

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

NOAM POUPKO-MANAGER - 250 S AUSTRALIAN AVENUE, SUITE 1600, WEST PALM BEACH, FL 33401

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)

/s/ Noam Poupko, Manager

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.

Noam Poupko

Typed or printed name of signer

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# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "Z LIFESTYLE 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 TENTH DAY OF DECEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "Z LIFESTYLE LLC" WAS FORMED ON THE FIFTEENTH DAY OF NOVEMBER, A.D. 2012.

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

FILED  
2015 DEC 10 AM 11:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



5242983 8300

SR# 20151284348

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State

Authentication: 10586450

Date: 12-10-15

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