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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

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

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## Foreign Limited Liability Company SUITE 1521 LLC

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K. SALY EXAMINER 2/26/2016 4:34:14 PM From: To: 8506176383( 2/4 )

## COVER LETTER

TO:	Registration Section Division of Corporat					
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Name of Limited Liability Company						
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Please :	return all correspondence	ce concerning this matter to	the following:			
		*****	Name of Person			
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		E-mail address: (to be	used for future annual	report no	ification)	
For furt	her information concer	ning this matter, please call:				
	Nam	e of Contact Person	at ( Area Code		rtime Telephone Number	
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	MAILING ADDRES Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 3231	ons		Division Registrat Clifton B 2661 Exc	CADDRESS: of Corporations ion Section suilding centive Center Circle see, FL 32301	
Enclose	ed is a check for the foll S125.00 Filing Fee	•	& □ \$155.00 Filin Certified Copy	_	☐ \$160.00 Filing Fee, Ce of Status & Certified Cop	

2/26/2016 4:34:14 PM From: To: 8506176383( 3/4 )

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SEXTION 605 0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RECISTER A FOREIGN LIMITED LABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. SUITE 1521 LLC (Name of Foreign Limited Limbility Company, must include "Limited Limbility Company," "L.L.C.," or "L.L.C.," (If name unavailable, omer alternate name adopted for the purpose of transacting business to Finida. The attenuate name must include "Limited Liability Company," "L.L.C," or "LLC.") 2. NEW YORK thursdiction under the law of which foreign limited liability (FEI number, d'applicable) company is organized) **DECEMBER 04, 2015** (Date first transacted business in Florida, if prior to registration.) (See sections 605 0904 & 605 0905, F.S. to determine penalty liability) 980 MADISON AVENUE, New York, NY 10075 (Sheet Address of Principal Office) 980 MADISON AVENUE, NEW YORK, NY 10075 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NQT acceptable) CT Corporation System Name: 1200 South Pine Island Road Office Address: Plantation Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited Rability 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 complywith 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. C T Corporation System (Registered agent's signifure) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: ELIZABETH TISCH, AUTHORIZED PERSON 980 MADISON AVENUE 3RD FLOOR, NEW YORK NY 10075 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 nath of the translator must be submitted)

Singlature 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.

Typed or privided name of signee



## State of New York Department of State } so

I hereby certify, that SUITE 1521 LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 02/21/2013, and that the Limited Liability Company is existing so far as shown by the records of the Department.

The Biennial Statement is past due.



Witness my hand and the official seal of the Department of State at the City of Albany, this 18th day of February two thousand and sixteen.

Anthony Giardina

Executive Deputy Secretary of State

201602190020 \* EZ