

Florida Department of State

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Division of Corporations

Fax Number : (850) 617-6383

From:

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Foreign Limited Liability Company 2918 8TH AVENUE, LLC

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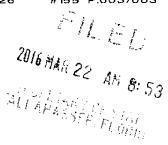
2/22/2016

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

IN COMPLIANCE WITH SEC COMPANY TO TRANSACT BU	TION 605,0902, FLORIDA STATUTES, THE FOLL ISINESS IN THE STATE OF FLORIDA:	OWING IS SUBMITTED TO REGISTER A	FOREIGN LIMITED LIABILITY
, 2918 8TH AVENUE, I	•		
	eign Limited Liability Company; must include "L	limited Liability Compuny," "L.L.C.," or	"LLC")
(If name unavailable, enter at Liability Company," "L.L.C.	ternate name adopted for the purpose of transact	ing business in Florida. The alternate na	ne must include "Limited
2. NEW YORK	,		
(Jurisdiction under the law	of which foreign limited liability	(FEI number, if applicable)
company is organized) UPON FILING			
4. <u>010311EH40</u>	(Date first transacted business in Florida	, if prior to registration.)	
- 906 F 180TH ST ST	(See sections 605,0904 & 605,0905, F.S. t E 201, BRONX, NY 10460	a determine pentity intomity)	
5. 308 C. 1801H 31., 31	2.201, 51.0(1/1), 11.1000		2016 HAR 22
			Control of the contro
004 G 1907U ST ST	(Street Address of Principal Off	ice)	A S COLUMN TO THE SECOND TO TH
6. 700 E. 1801H St., ST	E 201, BRONX, NY 10460		- <u> </u>
			_ 1
	(Mailing Address)		
7. Name and street addres	s of Florida registered agent: (P.O. Box No	OT acceptuble)	
Name:	BLUMBERGEXCELSIOR CORPORA	TE SERVICES, INC.	
	155 Office Plaza Drive, 1st Fl.		
Office Address:			
	TALLAHASSEE	, Florida 32301	-
Registered agent's accept	(City)	(Zip code)	
Having been named as rep	gistered agent and to accept service of proc	ess for the above stated limited liab	lity company at the place
designated in this applicat to complywith the provisio	tion, I hereby accept the appointment as rejons of all statutes relative to the proper and	gistered agent and agree to act in in complete performance of my duties	is capacity. I furiner agree i, and I um fumiliar with and
	ny position ax registered been \		CA, ASST. SECY
	(Registique agents	aignuture)	
8. The name, title or capu	city and address of the person(s) who has/ha	ve authority to manage is/are;	
JAY DEUTCHMAN, MA	NAGER, 906 E. 180TH ST., STE 201, BRO	ONX, NY 10460	
<u> </u>			··········

9. Attached is a certificate	of existence, no more than 90 days old, duly	authenticated by the official having	custody of records in the
urisdiction under the law of of the translator must be su	of which it is organized. (If the certificate is i	in a foreign language, a translation o	The certificate under oath
or the translation illust be 20			
	Signature of an authori	Pod percep	•
_		•	Milia de Managara de
This document is executed submitted in a document to	in accordance with section 605.0203 (1) (b) the Department of State constitutes a third d	, Florida Statutes, I am aware that any egree felony as provided for in s.817	/ 18150 Information _155, F.S.
	JAY DEUTCHMAN	÷ ·	

Typed or printed name of signee



State of New York Department of State } ss:

I hereby certify, that 2918 8TH AVENUE, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 02/12/2003, and that the Limited Liability Company is existing so far as shown by the records of the Department.

The Biennial Statement is past due.

I further certify, that no other documents have been filed by such Limited Liability Company.



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

Anthony Giardina

Executive Deputy Secretary of State

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