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Division of Corporations

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Email Address:

Foreign Limited Liability Company

Kasco, LLC dibla Kasco Services, LLC

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4/28/2016 11:06:26 AM From: To: 8506176383(2/5) 850-617-6381

4/28/2018 9:34:39 AM PAGE 1/001 Fax Server



April 28, 2016

FLORIDA DEPARTMENT OF STATE Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: KASCO, LLC REF: W16000019101

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.

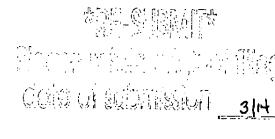
You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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

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Yasemin Y Sulker Regulatory Specialist II

FAX Aud. #: B16000064921 Letter Number: 316A00005255



P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO:	Registration Section Division of Corporation	ons				
SUBJE	KASCO, LLC					
	and the second s	Name o	of Limited Liability	Company	ACTION AND ADDRESS OF THE PARTY AND ADDRESS OF	
The end Existen	closed "Application by Fo ce, and check are submitt	reign Limited Liability Co ed to register the above ref	mpany for Authoria erenced foreign lin	zation to T nited liabili	ransact Business in Florida," Certific ly company to transact business in F	ate of lorida,.
Please	eturn all correspondence	concerning this matter to the	re following:			
	JENNIFER D					
	dien is accountable on your despectively plantically	And A comment of the pattern the continuous comments and continuous conti	Name of Person		· · · · · · · · · · · · · · · · · · ·	
	KASCO, LLC					
		1-Майдардарда по в основности допосноварда «° Манадана досковарда до венения и	Firm/Company	W		
	1133 WESTCI	HESTER AVENUE, SUITI	E N-222			
			Addross		and the second s	
	WHITE PLAN	NS, NY 10604				
		City/	State and Zip Code	3	a m. a. Maranta e Abiennos, mas marante priminino, français, establicado	
	JDICKSON@H.	ANDYHARMAN.COM				
	and the first of the second second and the second on the second of the s	E-mail address: (to be us	ed for future minua	l report no	filication)	
For furti	er information concernin	g this matter, please call:				
	JENNIFER DICKSON		407 at (951-52	(4	
	Name o	f Contact Person	Area Code	Day	time Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallabassee, FL 32314			Division Registrat Clifton B 2661 Exe	FADDRESS: of Corporations ion Section uilding countive Center Circle ice, FL 32301	
	is a check for the follow \$125.00 Filing Fee	ing amount: \$\Bigsize \text{\$130.00 Filing Fee & Certificate of Status}	□ \$155.00 Filh Certified Copy		□ \$160.00 Filing Pee, Certificate of Status & Certified Copy	

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 FOREKIN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	reign Limited Lability Company; and	areasse - islamesi f.ili	oning Company's 1715Co. 01	1.6,60. }	
Kasco Services, LLC If name unavailable, enter a hability Company," "L.L.C	alternate name adopted for the purpor	se of transacting busines	s in Florida. The alternate num	ie must inclu	de Timite
DELAWARE	, 10 (100.7)	2 13-3341885			
(Jurisdiction under the law	y of which foreign limited llability	3.	(FBI number, if applicable)		
company is organized)					
*	(Date first transacted busin	ess in Florida, if prior to	registration.)	•	
1660 TOWER ORON	(See sections 805.0904 & 605	5.0905, F.S. to determine	penalty liability)		
. 1309 TOWER UROV	'E AVE, ST LOUIS, MO 63110				
	(Sircet Address of		······································		
1133 WESTCHESTER	RAVENUE, SUITE N-222, WHI	ITE PLAINS, NY 10	504		
	(Mailing	Address)			
Name and street address	ss of Florida registeretl agent: (P.	O. Box NOT accente	able)		
	C T Corporation System	<u></u>	······ '		
Name:		***			
Office Address:	1200 South Pine Island Road				
	Plantation		, Florida 33324 (Zip code)		ਲੈ
	(City)		(Zip code)	_	-
egistored agent's accep	tance:				, p. 44
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Typed or printed name of signee

KENNETH BARKOFF

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "KASCO, 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 ELEVENTH DAY OF MARCH, A.D. 2016.

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

2089888 8300 \$R# 20161620201

You may verify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey W. Buffucs, Recresery of State

Authentication: 201972465

Date: 03-11-16