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(Re	questor's Name)	· · · · · ·		
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	_ Certificates	of Status		
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J. HARRIS

COVER LETTER

TO:	Registration Sec Division of Corp		8				C0	1	/7	
SUBJI	ECT:	MEYER	LANSKY	PH, LLC						
50 50 .		1121			Limited Liability C	ompany				
	closed "Application ace, and check are s									
Please	return all correspor	ndence co	oncerning th	is matter to the	following:					
			P	ROBERT A. (CHAVES					
			· · ·	N	ame of Person					
Gutter Chaves Josepher Rubin Forman Fleisher Miller P.A.										
Firm/Company										
		•								
2101 N.W. Corporate Boulevard, Suite 107										
· .		· · · - ·			Address		··· ··· = -· · · · · · · · · · · · · · ·			
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					d for future annual	report noti	fication)	un F	82	
For fur	ther information co	ncerning	this matter	, please call:				SECTION.		·
				•				<u> </u>	KH 11:	
	SUSANA II	BANEZ			at (561) 998	-7847		6.1	
		Name o	Contact Pe	erson	Area Code	Day	ime Telephone Nu	imber	•	
•	MAILING ADI						ADDRESS: of Corporations			
	Registration Sec					Registrati	on Section			
	P.O. Box 6327 Tallahassee, FL	32314					uilding cutive Center Circl ee, FL 32301	le		
Enclos	ed is a check for th	e follow	ng amount:							
	□ \$125.00 Filin		\$130.00	Filing Fee & e of Status	\$155.00 Filin Certified Copy	_	☐ \$160.00 Filing of Status & Certi			e



April 21, 2016

ROBERT A CHAVES GUTTER CHAVES JOSEPHER RUBIN FORMAN 2101 NW CORPORATE BLVD, SUITE 107 BOCA RATON, FL 33431

SUBJECT: MEYER LANSKY PH, LLC

Ref. Number: W16000029775

We have received your document for MEYER LANSKY PH, LLC and your check(s) totaling \$155.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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.

Jenna D Harris Regulatory Specialist II

Letter Number: 516A00008289

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	LANSKY PH, LLC of Foreign Limited Liability Company; m	ust include "Limited Liabil	ity Company," "L.L.C.," or "	LLC.")		
	inter alternate name adopted for the purpo	ose of transacting business i	in Florida. The alternate name	must inclu	de "Lim	ited
Liability Company,"		01 01	2/66/0			
2. DELA		381-22	246640 (FEI number, if applicable)			
company is organ	ne law of which foreign limited liability zed)		(FEI number, 11 applicable)			
Λ	n/a					
т		ness in Florida, if prior to re 5.0905, F.S. to determine p	egistration.) enalty liability)			
51475	West Cypress Creek Road,	Suite 202	<u></u>	—e)'		
Fort	Lauderdale, Florida 3330	9		لاين شور (۱۱ سا	ಶ	
		Principal Office)		<u> </u>	ij	· - ·
61475	West Cypress Creek Road,	Suite 202		911 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	20 12	4 21 2 14 15 18 1
Fort	Lauderdale, Florida 3330	THE PARTY OF THE P			<u>m</u>	*****
	(Mailing	g Address)	•			- marine
7. Name and stree	address of Florida registered agent: (ble)	21	2; 2;	Volume Town
Name:	M & W Agents, Inc	•		ا تا ا	 -J	
Office Ad	ress: 2101 N.W. Corpora	te Blvd., Ste.10	07			
	Boca Raton		, Florida 33431 (Zip code)			
	(City)		(Zip code)			
designated in this to complywith the	l as registered agent and to accept se oplication, I hereby accept the appoi rovisions of all statutes relative to th ns of my position as registered agent	niment us registered aga Groper and complete p	on gad agree to act in this	capacity.	I furth	er agree
	· (Regi	stered agent's signature)				
	or capacity and address of the person(s) who has/have authorit	y to manage is/are:			
ANDE	S SCHROEDER, Member		·			
1475	West Cypress Creek Road,	Suite 202				,
Fort	Lauderdale, Florida 3330	9	· · · · · · · · · · · · · · · · · · ·			
	ificate of existence, no more than 90 of a law of which it is organized. (If the it be submitted)					
	Signatu	re of an authorized person				
This document is a submitted in a docu	ecuted in accordance with section 603 nent to the Department of State consti	5.0203 (1) (b), Florida St itutes a third degree felor	atutes. I am aware that any as provided for in s.817.	false infor	mation	
	ANDERS SCHROEL	ER				
	Typed o	r printed name of signee				

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "MEYER LANSKY PH, 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 TWENTY-FIFTH DAY OF APRIL, A.D. 2016.

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

e at corp.delaware.gov/au

Authentication: 202202798

Date: 04-25-16

5992182 8300 SR# 20162521960