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· (Requestor's Name)	
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(City/State/Zip/Phone #)	
(Business Entity Name)	
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## TO: Registration Section Division of Corporations

PALM BEACH DUNBAR LLC

SUBJECT:

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Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

	JOHN RANDO	LPH			
		Na	me of Person		
	SCIAME DEV	ELOPMENT, INC.			
		Fi	m/Company		
	14 WALL STR	EET, 2ND FL			
			Address		<u> </u>
	NEW YORK, N	IY 10005			
	÷	City/St	ate and Zip Code	<u> </u>	
F	IONNA@SCIA	ME.COM			
		E-mail address: (to be used	for future annual	report noti	fication)
For further inform	ation concerning	g this matter, please call:			
FIONNA	SCIAME		212 at (	232-220	0
	Name o	f Contact Person	Area Code	Dayt	ime Telephone Number
Division Registrat P.O. Box	G ADDRESS: of Corporations ion Section 6327 ee, FL 32314			Division o Registratio Clifton Bu 2661 Exec	
Enclosed is a chec					
□ \$125.0	0 Filing Fee	□ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	■ \$160.00 Filing Fee, 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 FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

## PALM BEACH DUNBAR LLC

(Name of Foreign Limited Liabili	ty 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 "Lir	mited
Liability Company," "L.L.C," or "LLC.")	

3.

(FEI number, if applicable)

, NEW YOR	K
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(Jurisdiction under the		of which	foreign	limited	liability
<ul> <li>company is organized</li> </ul>	1)				

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

5. 14 WALL STREET, 2ND FL

NEW YORK, NY 10005

(Street Address of Principal Office)

6. <sup>14</sup> WALL STREET, 2ND FL

NEW	YORK,	NY	10005
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(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:	ANDREW SCIAME	
Office Address:	179 BRADLEY PLACE	
	PALM BEACH	, Florida <sup>33480</sup>
	(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 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.

()		್ ಹೆ	
(Registered agent's signature)		- HA	
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:		Y23	
FRANK J. SCIAME, JR MANAGER			
			1
		4294 Cu>	
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official havi	ng custod		ord

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)

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.

FIONNA SCIAME, AUTHORIZED REPRESENTATIVE

Typed or printed name of signee

## State of New York } ss: Department of State

I hereby certify, that PALM BEACH DUNBAR LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 05/05/2016, and that the Limited Liability Company is existing so far as shown by the records of the Department.



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WITNESS my hand and the official seal of the Department of State, at the City of Albany, this 5th day of May two thousand and sixteen, at 1:51 PM.

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Executive Deputy Secretary of State

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