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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ MAIL

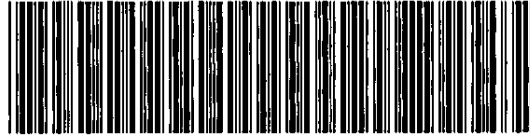
(Business Entity Name)

(Document Number)

Certified Copies Certificates of Status

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 27 2016
J. HARRIS

~~1105C-2114~~

COVER LETTER

**TO: Registration Section
Division of Corporations**

ANDREW T. FRANZONE, LLC

SUBJECT:

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:

ANDREW T. FRANZONE

Name of Person

ANDREW T. FRANZONE, LLC

Firm/Company

205 CESSNA BLVD, HANGAR 2

Address

PORT ORANGE, FL 32128

City/State and Zip Code

ANDREW.FRANZONE@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANDREW T. FRANZONE

at (917)

544-9151

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2016 MAY 24 PM 1:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 16, 2016

ANDREW T FRANZONE
205 CESSNA BLVD, HANGAR 2
PORT ORANGE, FL 32128

SUBJECT: ANDREW T. FRANZONE LLC
Ref. Number: W16000035611

We have received your document for ANDREW T. FRANZONE LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with 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: 916A00010311

FILED
16 MAY 24 PM 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

1. ANDREW T. FRANZONE, LLC
(Name of Foreign Limited Liability 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 "Limited Liability Company," "L.L.C.," or "LLC.")

2. NEW YORK 3. 20-3934041
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. MARCH 1, 2016
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 205 CESSNA BLVD HANGAR 2
PORT ORANGE, FL 32128
(Street Address of Principal Office)

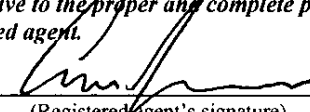
6. 205 CESSNA BLVD HANGAR 2
PORT ORANGE, FL 32128
(Mailing Address)

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

Name: ANDREW T. FRANZONE
Office Address: 205 CESSNA BLVD HANGAR 2
PORT ORANGE, Florida 32128
(City) (Zip code)

Registered agent's acceptance:

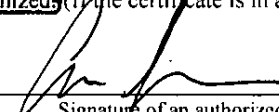
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.


(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

ANDREW T. FRANZONE, MANAGING MEMBER
205 CESSNA BLVD HANGAR 2
PORT ORANGE, FL 32128

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.

ANDREW T. FRANZONE
Typed or printed name of signee

FILED
16 MAY 24 PM 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

State of New York
Department of State } ss:

I hereby certify, that ANDREW T. FRANZONE LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 09/06/2005, 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 04th day of May two
thousand and sixteen.*

Anthony Scardino

Executive Deputy Secretary of State