

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

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From:

Account Name : ALLSTATE CORPORATE SERVICES

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Email	Address.	! <u></u>	
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Foreign Limited Liability Company JEA PETRAKIS FAMILY PROPERTIES, LLC

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$130.00

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COVER LETTER

TO:

Registration Section Division of Corporations

JEA PETRAKIS FAMILY PROPERTIES, LLC

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:	
Allstate Corporate Services Corp.	
Name of Person	•
1222 Avenue M, Suite 301	
Firm/Company	SECRI TALLA
Address	- 第 誤-
Brooklyn, NY 11230	Single Control
City/State and Zip Code	
sal@acs123.com	9: 0:1
E-mail address: (to be used for future annual report notification)	- 25 gm
For further information concerning this matter, please call:	
Naomi Ostopowitz 800 906-9220	
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

State of New York Department of State } ss:

I hereby certify, that JEA PETRAKIS FAMILY PROPERTIES, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/14/2016, and that the Limited Liability Company is existing so far as shown by the records of the Department.

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

OF NEW OF STATE OF ST

Witness my hand and the official seal of the Department of State at the City of Albany, this 01st day of August two thousand and sixteen.

Donathy State

Anthony Giardina
Executive Deputy Secretary of State

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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:

	PETRAKIS	S FAMILY PRO	OPERTIES, L	.LÇ			-		
	(Name of Fore	gn Limited Liability C	ompany; must include	"Limited Lis	bility Company	," "L.L.C.," o	r"LLC.")		
(If name una Liability Co	available, enter al mpany," "L.L.C,	ternate name adopted f	or the purpose of trans	sacting busine	ess in Florida. T	he alternate na	me must incl	ude "Limi	ited
2 NEW	V YORK	,	2	N/A					
	ion under the law y is organized)	of which foreign limit	ed liability		(FEI nur	nber, if applice	ible)		
4. UPC	ON REG	ISTRATION	1						
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5. 220	WESTBU	RY AVENUE	SUITE 200.	CARLE	PLACE	NEW Y	ORK, 1	1514	= ⟨n
								57	ECS.
	 		(Street Address of	Principal Off	ice)			- 35	盖.
6. 220 \	WESTBU	RY AVENUE,	SUITE 200,	CARLE	PLACE,	NEW Y	ORK, 1	1514	NEW YEAR
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having cu acceptabl	istody of reco	nal certificate of ords in the jurisdic ficate is in a forei	ction under the la	w of whic	h it is orgai	nized. (A pl	hotocopy i	is not	
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(In accordance am aware that	e with section 605.0 any false informati	203, F.S., the execution on submitted in a docume	Signature of an a of this document constituent to the Department of	ites an affirmeti	on under the pen	alties of perjury clony as provide	that the facts st d for in s 817.1	ated herein 55, F.S.)	are true. I
		Steven Weiss, Au	thorized Person						
		T	ped or printed n	ame of sig	nee		_		

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	of the Limited Liability Company TRAKIS FAMILY P		
If unavailable	, the alternate to be used in the sta	te of Florida is:	
2. The name a	and the Florida street address of the	ne registered agent and office are:	. 70
	Registered Agent	Solutions, Inc.	16 AUG
		(Name)	- 6 - 2 HASS
	155 Office Plaza [Dr. Suite A	ריון
	Florida Street Address	(P.O. Box NOT ACCEPTABLE)	- AM 9:
	Tallahassee	32301	25 25
		City/State/Zip	-

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

Steven Weiss, Assistant Secretary

\$ 100.00
Filing Fee for Application
\$ 25.00
Designation of Registered Agent
\$ 30.00
Certified Copy (optional)
\$ 5.00
Certificate of Status (optional)