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Foreign Limited Liability Company Atlantic State Consultants LLC

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H16000190212

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. Atlantic State Consultants 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. (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
- Upon filing.

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

5. 99 CALVERT STREET

HARRISON, NY 10528

(Street Address of Principal Office)

6. 99 CALVERT STREET

LIADDIDONE NIX 40000

(Mailing Address)	,		
	- AR	6	
7. The name, title or capacity and address of the person(s) who has/have authority to ma	ina ke isk ar	e:	
	単合	AU	-11
Authorized Member	I.M. Tom	67	
		1	
RUSSELL HERNANDEZ, 99 CALVERT STREET, HARRISON, NY 10528	m <u>c</u>	4	m_
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8. Attached is an original 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. (A photocopy is not acceptable. 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

the accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of penjury that the facts stated herein are true. 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 5.817.155, F.S.)

RUSSELL HERNANDEZ

Typed or printed name of signee

H16000190212

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CERTIFICATE OF DESIGNATION OF H16000190212 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.

1. The name of the Limited Liability Company is:

Atlantic State Consultants LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Hubco Registered Agent Services, Inc. (Name) 155 Office Plaza Drive, 1st Floor Florida Street Address (P.O. Box NOT ACCEPTABLE) Tallahassee 32301 FL City/State/Zip Having been named as registered agent and to accept service of process for the above stated Amited liability company at the place designated in this certificate, I hereby accept the appointment and registered ugent and agree to act in this capacity. I further agree to comply with the proverant of the statutes relating to the proper and complete performance of my duties, and I am familiar EnE and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida m Statutes. \Box 5 ากการค่ Bruce B. Hubbard, President

State of New York Department of State } ss:

I hereby certify, that ATLANTIC STATE CONSULTANTS LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 02/27/2015, 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.



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.

Autory Sicidine

Anthony Giardina Executive Deputy Secretary of State

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