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SECRETARY OF STATE

K. SALY

DUA

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	101HOMES REALTY LLC					
SUBJE		imited Liability Company				
		any for Authorization to Transact Business in Florida," Certificate of need foreign limited liability company to transact business in Florida				
Please r	return all correspondence concerning this matter to the f	following:				
	URI COHEN					
	Na	une of Person				
	Firm/Company					
	2 Northside Piers 6K	2 Northside Piers 6K				
		Address				
	Brooklyn, NY 11249	Brooklyn, NY 11249				
	City/St	ate and Zip Code				
	uricohen646@gmail.com					
	E-mail address: (to be used	for future annual report notification)				
For furt	ther information concerning this matter, please call:					
	URI COHEN	646 302-6767 at ()				
	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				
Enclose	ed is a check for the following amount: \$\Boxed{\subseteq} \$125.00 \text{ Filing Fee & Certificate of Status}\$	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate Certified Copy 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.

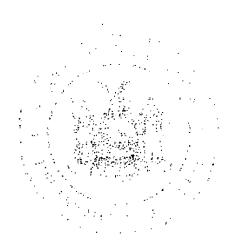
1. 101HOMES REALTY			de "Limited Liability Company," "L.L.C.," o	r"LLC.")
(If name unavailable, enter a Liability Company," "L.L.C.		e of tra	nsacting business in Florida. The alternate na	me must include "Limited
2 New York State	,	3	27-4285290	
	of which foreign limited liability	3.	(FEI number, if applicable	=)
408/01/2016				
•	(Date first transacted busine (See sections 605,0904 & 605	ss in F .0905.	lorida, if prior to registration.) F.S. to determine penalty liability)	
5. 2 Northside Piers 6K	(***************************************	_
Brooklyn, NY 11249				7 20
	(Street Address of	Princip	al Office)	一路点啊
6. 2 Northside Piers 6K				- 500 - 1
Brooklyn, NY 11249				TALLANS E
	(Mailing	Addres	s)	一門子口
7. Name and street addres	ss of Florida registered agent: (P.	.O. Bo	x <u>NOT</u> acceptable)	FLORE 2
Name:	Uri Cohen			
Office Address:	3389 Sheridan Street Suite 150			
	Hollywood		, Florida ³³⁰²¹	
	(City)		(Zip code)	
designated in this applica to complywith the provisi	ition, I hereby accept the appoint ions of all statutes relative to the my position as registered agent.	tment proper	process for the above stated limited liab as registered agent and agree to act in the and complete performance of my dutie	his capacity. I further agree
	(Regist	ered ag	ent's signature)	
8. The name, title or capa Uri Cohen, Member	acity and address of the person(s)	who h	nas/have authority to manage is/are:	
2 Northside Piers 6K				
Brooklyn, NY 11249				
9. Attached is a certificate	of which it is organized. (If the cubmitted)	ertifica	, duly authenticated by the official having ate is in a foreign language, a translation of	
	Signature	to i ain a	nuthorized person	
			l) (b), Florida Statutes. I am aware that ar hird degree felony as provided for in s.81	
	Uri Cohen			

Typed or printed name of signee

State of New York Department of State } ss:

I hereby certify, that 101HOMES REALTY LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 12/13/2010, and that the Limited Liability Company is existing so far as shown by the records of the Department.

The Biennial Statement is past due.



TILED PHO: 27

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 25th day of July two thousand and sixteen.

Executive Deputy Secretary of State