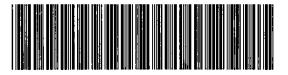
# MICOONSOACO

(Re	questor's Name)			
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PICK-UP	WAIT	MAIL		
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Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			
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Office Use Only



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July 6, 2016

SAYAM IBRAHIM 3389 SHERIDIAN ST #454 HOLLYWOOD, FL 33021

SUBJECT: SDX PROPERTIES LLC

Ref. Number: W16000047142

We have received your document for SDX PROPERTIES LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Deborah Bruce Regulatory Specialist II

Letter Number: 616A00014104

### COVER LETTER

1. 1. 1. 1. 1. 3°

		tion Section ' of Corporation	as.					
SUBJEC		C Properties LLC	2					
			Name of	Limit	ted Liability (	Company		-
			eign Limited Liability Com d to register the above refer					
Please ret	turn all c	orrespondence c	oncerning this matter to the	follo	wing:			
		Sayam Ibrahim						
			N	lame o	of Person			•
			F	irm/C	ompany			•
		3389 Sheridan S	St #454					
Address							•	
		Hollywood, FL	33021					
			City/S	tate a	nd Zip Code			•
	s	xproperties@gm	nail.com					
			E-mail address: (to be use	d for	future annual	report not	ification)	•
For furthe	er inform	ation concerning	g this matter, please call:					
	Sayam I	brahim		at	732 (	718968 ì		= <b>1</b>
-		Name or	f Contact Person		Area Code	Day	time Telephone Number	A STATE OF THE STA
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		3		
		k for the followi	ing amount:  \$\Boxed\$ \$130.00 Filing Fee & Certificate of Status		\$155,00 Filin rtified Copy	g Fee &	☐ \$160.00 Filing Fee, C of Status & Certified Co	

## • 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:

SDX Properties LLC	eign Limited Liability Company; mi		bility Company," "L.L.C.,"	or "LLC.")	
(If name unavailable, enter al Liability Company,""L.L.C,	Iternate name adopted for the purpo	se of transacting busines	s in Florida. The alternate r	name must include "Limited	
New Jersey	of ELC. )	<sub>2</sub> 46-2062542			
	of which foreign limited liability	ole)			
4.					
	(Date first transacted busin (See sections 605,0904 & 605	iess in Florida, if prior to 5.0905, F.S. to determin	registration.) e penalty liability)	***************************************	
5. Five Greentree Centre,	, STE 104, 525 Route 73 North			_	
Marlton, New Jersey 0					
2000 01 - 11 - 01 - 14 - 14	(Street Address of	Principal Office)		_	
6. 3389 Sheridan St #454				<del></del>	
Hollywood, FL 33021					
_	(Mailing	(Address)		7	
7. Name and street address	ss of Florida registered agent: (F	P.O. Box NOT accept	able)		
Name:	Sayam Ibrahim		<u>.</u>		
Office Address:	3389 Sheridan St #454	<u></u>	_		
	Hollywood		_ , Florida		
<b>.</b>	(City)		(Zip code)		
designated in this applica to complywith the provision accept the obligations of t	egistered agent and to accept set tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent.	ntment as registered as eproper and complete series agent's signature)	gent and agree to act in performance of my dut	this capacity. I further ag	ree
Sayam Ibrahim, member					
3389 Sheridan St #454					
Hollywood, FL 33021					
	5		gn language, a translation	of the certificate under oa	
This document is executed submitted in a document to	d in accordance with section 605, the Department of State constit	.0203 (1) (b), Florida ! tutes a third degree fel	Statutes. I am aware that a	any false information 17.155, F.S.	

Typed or printed name of signee

Sayam Ibrahim

## STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

### SDX PROPERTIES LLC 0400545396

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on January 25, 2013.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

REGISTERED AGENTS INC. FIVE GREENTREE CENTRE, STE 104 525 ROUTE 73 NORTH MARLTON, 08053



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 8th day of August, 2016

Ford M. Scudder Acting State Treasurer

Certificate Number: 6073430344

Verify this certificate online at

 $https://www1.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp$