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S Warren AUG 2 6 2016 CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 266478 7722207

AUTHORIZATION : Spulle

COST LIMIT : \$ (163\_.75

ORDER DATE: August 25, 2016

ORDER TIME : 12:03 PM

ORDER NO. : 266478-010

CUSTOMER NO: 7722207

#### FOREIGN FILINGS

NAME: HATZIMEMOS PARTNERS LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

#### **COVER LETTER**

TO:		stration Section sion of Corporation	ាទ						
SUBJE		Hatzimemos Partne	rs LLC						
DO DO L			Name of I	imited Liability C	Company				
The enc.	losed ce, and	"Application by For I check are submitte	eign Limited Liability Comp d to register the above refere	any for Authoriza nced foreign limit	tion to Tra ed liability	nsact Business in Florida," Ce company to transact business	ertificate of in Florida		
Please re	eturn :	all correspondence of	concerning this matter to the	following:					
		Oliver Libby							
		*******	Na	me of Person					
		Hatzimemos Partners LLC							
	Firm/Company								
	1270 Ave of the Americas Ste 1815								
Address									
		New York	New York	10020					
City/State and Zip Code									
oliver@hpartnersllc.com									
		* *************************************	E-mail address: (to be used	for future annual	report not	ification)			
For furt	her in	formation concernin	g this matter, please call:			•			
Oliver Libby		212 _ at (	372-710	63					
		Name o	of Contact Person	Area Code	Day	time Telephone Number			
	Divi: Regi P.O.	ILING ADDRESS: sion of Corporations stration Section Box 6327 shassee, FL 32314	<b>.</b>		Division of Registratic Clifton B 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301			
Enclose		check for the follow 125.00 Filing Fee	ving amount:  \$\Bigsize \text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\exittit{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\text{\$\text{\$\exitt{\$\text{\$\}}}\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\text{\$\tex	□ \$155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Certi of Status & Certified Copy	ificate		

### 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: HATZIMEMOS PARTNERS 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.") , DELAWARE 3 27-0159403 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 04/28/2015 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 1270 AVENUE OF THE AMERICAS STE 1815 NEW YORK, NY 10020 (Street Address of Principal Office) (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee (City) 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 complywith 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, Courtney Williams (Registered agent's signature) Asst. Vice President 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: ERIC HATZIMEMOS, MANAGING MEMBER 1270 AVENUE OF THE AMERICAS, STE 1815 **NEW YORK NY 10020** 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. ERIC 10M3415TAH Typed or printed name of signee

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## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "HATZIMEMOS PARTNERS LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF AUGUST, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HATZIMEMOS PARTNERS LLC" WAS FORMED ON THE NINTH DAY OF APRIL, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 202886067

Date: 08-25-16

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