

**M16000007236**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : ALLSTATE CORPORATE SERVICES CORE  
Account Number : I20040000031  
Phone : (800) 906-9220  
Fax Number : (800) 906-9880

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please\*\*

Email Address: \_\_\_\_\_

Foreign Limited Liability Company  
**PETRAKIS FAMILY PROPERTIES, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

2016 SEP 12 AM 9:54

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ALLSTATE CORPORATE SERVICES CORE  
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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: 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

Address

**Brooklyn, NY 11230**

City/State and Zip Code

**sal@acs123.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Naomi Ostopowitz**

Name of Contact Person

**800**

Area Code

**906-9220**

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 PETRAKIS FAMILY PROPERTIES, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 05/24/2016, 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.



\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 09th day of September  
two thousand and sixteen.*

A handwritten signature in cursive script that reads "Anthony Giardina".

Anthony Giardina  
Executive Deputy Secretary of State

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A  
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. PETRAKIS FAMILY PROPERTIES, 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. N/A  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 220 WESTBURY AVENUE, SUITE 200, CARLE PLACE, NEW YORK, 11514


(Street Address of Principal Office)

6. 220 WESTBURY AVENUE, SUITE 200, CARLE PLACE, NEW YORK, 11514

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are  
PETER PETRAKIS, MEMBER, 220 WESTBURY AVENUE, SUITE 200, CARLE PLACE, NEW YORK, 11514

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

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury 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 s.817.155, F.S.)

Steven Weiss, Authorized Person

\_\_\_\_\_  
Typed or printed name of signee

**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.

1. The name of the Limited Liability Company is:

**PETRAKIS FAMILY PROPERTIES, LLC**

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

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

**Registered Agent Solutions, Inc.**

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(Name)

**155 Office Plaza Dr. Suite A**

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Florida Street Address (P.O. Box NOT ACCEPTABLE)

Tallahassee

FL

32301

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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)

16 SEP 12 AM 13:43  
TALLAHASSEE, FLORIDA