MIL00008713

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
1.09						
W16-13369						

Office Use Only



600291540306

10/27/16--01014--005 **125.00

FILED SON SECRETARY OF SHIP

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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 28, 2016

ANTONIO PECORA 35-15 FARRINGTON STREET FLUSHING, NY 11354

SUBJECT: TPEC LLC / TPEC FL LLC

Ref. Number: W16000073369

We have received your document for TPEC LLC / TPEC FL LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filled and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer 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: 816A00023221

COVER LETTER

SUBJECT:	TPEC LLC				
JOBSEC 1.		Limited Liability Company	——————————————————————————————————————		
The enclose Existence, a	d "Application by Foreign Limited Liability Comp nd check are submitted to register the above refere	eany for Authorization to Transact Business in enced foreign limited liability company to trans	r Florida," Certific sact business in F		
lease retun	n all correspondence concerning this matter to the	following:			
	ANTONINO PECORA				
	N	ame of Person			
	TPEC LLC				
	Fi	rm/Company			
	35-15 FARRINGTON STREET				
	Address				
	FLUSHING, NY 11354	ţ	2016 K		
	City/S	tate and Zip Code	AR SV		
	EGRECO@TPECLLC.COM		SEE -		
	E-mail address: (to be used	for future annual report notification)	75 U		
or further i	information concerning this matter, please call:		Ostrology St. Co.		
EL	EONORA GRECO	347 368-6033	D 0		
	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			
	a check for the following amount: \$125.00 Filing Fee \$\square\$ \$\$\$ Certificate of Status	☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Certified Copy ☐ Status & Ce	ing Fee, Certificate rtified 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:

, TPEC LLC		• •			
į	eign Limited Liability Company: mu	ust include "Limited Lia	bility Company," "L.L.C"	" or "LLC.")	
A	170		•		
(If name unavailable, enter a Liability Company," "L.L.C.	Liternate name adopted for the purpos "or "LLC.")		ss in Florida. The alternate	name must include "	Limited
2. NEW YORK		3. 42-1600466			
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if applica	ıble)	
4					
••	(Date first transacted busin (See sections 605.0904 & 605	iess in Florida, it prior to	o registration.)		
5. TPEC LLC	(See Seedon's Geo. 626 Ca.				
35-15 FARRINGTON	STREET				
	(Street Address of	Principal Office)		TA 28	
6. FLUSHING, NY 1135	4			2016 NOV -	71
				新夏	
	(Mailing	(Address)			
7. Name and street address	ss of Florida registered agent: (P	P.O. Box NOT accept	table)	THE T	[1]
Name:	SOUTHEASTERN TITLE CO		_	r o	O
Office Address:	2999 NE 191 STREET			TATE ORIDA	
	AVENTURA		Florida 33180		
Registered agent's accep	(City)		(Zip code)		
designated in this applica to complywith the provisi	egistered agent and to accept ser tion, I hereby accept the appoin ions of all statutes related to the my position as registered ugent.	n jment as registered a e proper and complete	igent and agree to act in	this capacity. I fu	irther agree
	(Regis	stered agent's signature)			
8. The name, title or capa	acity and address of the person(s)) who has/have author	rity to manage is/are:		•
ANTONINO PECORA	MEMBER		,		
35-15 FARRINGTON ST	• ==:				
FLUSHING, NY 11354			·		
9. Attached is a certificate jurisdiction under the law of the translator must be st	of existence, no more than 90 da of which it is organized. (If the c ubmitted)	ays old, duly authentic pertificate is in a foreign	cated by the official havi gn language, a translatio >	ing custody of recorn of the certificate t	rds in the under oath
	Signature	e of an authorized perso	n		
This document is executed submitted in a document to	I in accordance with section 605.0 the Department of State constitu	.0203 (1) (b), Florida : utes a third degree felo	Statutes. I am aware that onv as provided for in s.	any false informati 817.155, F.S.	on

Typed or printed name of signee

ANTONINO PECORA

State of New York Department of State } ss:

I hereby certify, that TPEC LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/21/2003, and that the Limited Liability Company is existing so far as shown by the records of the Department. I further certify the following:

A Biennial Statement was filed 07/27/2005.

A Biennial Statement was filed 07/20/2007.

A Biennial Statement was filed 07/17/2009.

A Biennial Statement was filed 09/29/2011.

A Biennial Statement was filed 07/29/2013.

The Biennial Statement is past due.

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 20th day of October two thousand and sixteen.

Brendan W. Fitzgerald

Executive Deputy Secretary of State

201610210407 * 39

biennial

Eleonora Greco

Mon 10/24/2016 10:09 AM

To:Daniel Doudnik <danield0303@gmail.com>;

Division of Corporations Biennial Statement e-Filing System

SUBMISSION CONFIRMATION PLEASE PRINT FOR YOUR RECORDS

Thank you for submitting your biennial statement online. The biennial statement submitted throu the Biennial Statement e-Filing System has been transmitted to the Department of State.

Transmittal Informational:

DOS ID:

2932784

BUSINESS NAME:

TPEC LLC

Filing Period:

07/2015

Transmittal Date:

10/24/2016 10:09 AM

Credit Card Auth Code:

197057

Credit Card Trans Id:

241016B39-FEE16FC2-B033-4589-AA5B-C57AE0D45DCA

Last 4 Digits of Credit Card: 2016

Record Number:

20161024000063

The Credit/Debit Card has been charged \$ 9.00 on: 10/24/2016 10:09 AM

Upon successful filing of the electronic biennial statement in the records of the Department of State a filin acknowledgment will be sent to you at the e-Mail address provided: EGRECO@TPECLLC.COM.

Please note that modifications made through the e-Statement Filing System may not be reflected in the records of the Department for 1 to 3 business days.

If you have questions regarding your electronic filing please contact us at corporations@dosgrav

NYS Division of Corporations, State Records & Uniform Commercial Code One Commerce Plaza, 99 Washington Avenue Albany, NY 12231-0001 (518) 473-2492

> PRINT THIS PAGE **CLOSE APPLICATION** Return to Main Page

NYS DOS Corporations Ebiennial Filing Acknowledgment: 161024006058

NYS DOS Corporations Ebiennial < Corporations@dos.ny.gov>

Mon 10/24/2016 9:04 PM

To:Eleonora Greco <egreco@tpeclic.com>;

9 1 attachments (24 KB)

161024006058.pdf;

New York State Department of State **Division of Corporations**

PLEASE PRINT THIS E-MAIL FOR YOUR RECORDS

Thank you for submitting the biennial stat ement for your business entity through the e-Statement Filing System. The biennial statement has been filed with the Department of State.

Attached is a copy of the filed biennial stat ement for the following business entity:

DOS ID:

2932784

BUSINESS NAME: TPEC LLC

Filing date:

10/24/2016

Next Filing Period: 07/2017

E-mail Address:

EGRECO@TPECLLC.COM

The Department of State recommends that you retain this filing acknowledgment and attachment for your records. The Department of State will send an email reminder notice when the next biennial statement for your business entity is due. The notice will be sent to the email address indicated above.

To update your email address, please go to the Department of State's Biennial Statement Email Address Notification website at www.email.ebiennial.dos.ny .gov.

Biennial Statement

NYS Department of State
Division of Corporations, State Records &
Uniform Commercial Code
http://www.dos.ny.gov

BUSINESS NAME:

TPEC LLC

FILING PERIOD: 07/20	15		
Part 1 - Service of Process Address (A	ddress must be with	in the United States or its territori	es)
Name TPEC LLC			
Address Line 1 35-15 FARRINGTON ST			
Address Line 2			
City FLUSHING		State NY	Zip Code 11354
			<u> </u>
Signer Information I affirm that the statements contained herein are to constitutes my electronic signature.	ue to the best of my knowk	edge, that I am authorized to sign this Biennia	l Statement and that my signature typed below
Electronic Signature ANTONINO PECORA			
Capacity of Signer MEMBER			

FILED WITH THE NYS DEPARTMENT OF STATE ON: 10/24/2016 FILING NUMBER: 161024006058 - 2932784