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Division of Corporations

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From:

Account Name : ALVAREZ ARRIETA & DIAZ-SILVEIRA LLP

Account Number : 120130000001 Phone

: (305)740~1940

Fax Number

: (305)740~1941

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Email Address: ccpartridge@yahoo.com

Foreign Limited Liability Company Clermont Realty LLC

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From Alvarez Arrieta DiazSilveira 1.305.873.8716 Fri Nov 18 10:26:22 2016 EST Page 2 of 3

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 Clermont Realty LLC	ASINESS IN THE STATE OF FLORIDA:		
	zign Limited Liability Company; must incl	ude "Limited Liability Company," "L.L.C.," or "LL	C.**)
(If name unavailable, enter al Liability Company," "L.L.C,	ternate name adopted for the purpose of tr	ansacting business in Florida. The alternate name mi	ust include "Limited
2. New York			
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	_
4	/D-1-5		
	(Date first transacted business in I (See sections 605.0904 & 605.0905,	florida, it prior to registration.) F.S. to determine penalty liability)	
5. 1769 NE 33rd Street			
Pompano Reach, Florid	da 33064		6
	(Street Address of Princip	onl Office)	5 E
6. 2250 NE 26th Street			
Lighthouse Point, Flori	da 33064		8 325
	(Muiling Addres	ss)	235
7. Name and street address	s of Florida registered agent: (P.O. Be	ox <u>NOT</u> acceptable)	a constant
Name;	c/o Chris Partridge	<u></u>	5 TH
Office Address:	1769 NE 33rd Street		
	Pompano Beach	, Florida 33064	
Registered agent's accep	(City)	(Zip code)	
Having been named as red designated in this applica- to complywith the provision	gistered agent and to accept service of tion, I hereby accept the appointment	f process for the above stated limited liability of us registered agent, and agree to uct in this caperand complete performance of my duties, and	pacity. I further agree
	(Resistered a	gent's symptome	
		7	
·	city and address of the person(s) who	has/have authority to manage is/are:	
Chris Partridge - Managin	g Member		
Carmen Partridge - Co Mi	ınager		
9. Attached is a certificate jurisdiction under the law of the translator must be su	abraisted)	duly authenticated by the official having custo are it in a foreign language, a translation of the	ody of records in the certificate under oath
	Signature of an a	authorized nepthn	
This document is executed submitted in a document to	in accordance with section 605.0203 the Department of State constitutes a	1) (b), Florida Statutes. I am aware that any fals hird degree felony as provided for in s.817.155	e information , F.S.
	Typed or printed	name of signce	

State of New York Department of State } ss:

I hereby certify, that CLERMONT REALTY LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 06/04/2014, and that the Limited Liability Company is existing so far as shown by the records of the Department.



Witness my hand and the official seal of the Department of State at the City of Albany, this 18th day of October two thousand and sixteen.

Brendan W. Fitzgerald Executive Deputy Secretary of State SELVETARY OF FLORID

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