M17000000949

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Na	me)
(Document Number)		
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300293295853

01/31/17--01022--009 **125.08

17 JAN 31 PM 2: 01

O SIMMONS FEB 0 2 2017

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Adler Social LLC	
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Busines Existence, and check are submitted to register the above referenced foreign limited liability company to	
Please return all correspondence concerning this matter to the following:	
Philip Palmetto Name of Person	
Name of Person	
Kantor, Palmetto, Zeigler, Chamberlain. + Pe	rrella, PL
1000 NW Co5th Street, Suite 201 Address	
Fort Lauderdale, FL 38309 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Philip Palmetto at (954) 432 · 3100 Name of Contact Person Area Code Daytime Telephon	e Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center of Tallahassee, FL 32301	
	iling Fee, Certificate Certified 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:
1. Adler Social LLC (Name of Foreign Limited Liability Joinpany; 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. Nevada Secretary of State (Jurisdiction under the law of which foreign limited liability company is organized) 3. 47-3133417 (FEI number, if applicable)
4 01/13/2017
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5 1451 W Cypress Creek Road, Suite 365
Fort Lauderdale, FL 33309
6. 1000 NW U64th Street, Suite 201
6. 1000 NW U6th Street, Suite 201
tart Laugerciale, the 33604 (Mailing Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Name: Philip Palmetto
Office Address: 1000 NW (65th Street Suite 201
54 1040h dala 22200
(City) (Zip code)
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 an accept the obligations of my position as registered agent's signature) (Registered agent's signature)
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
KODIN LINCOIN - COCHOE, Managing Momber 1276 Bergen Bt. #2 Brookyp. My 11213
Stetlan Singer, Managing Member 283 5th St. Apt. 3F Jersey City, NJ 07302
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.
Robin Lincoln - Codioe
Typed or printed name of signee U





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, ADLER SOCIAL, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since February 10, 2015, and is in good standing in this state.

Certified By: Tracy Gillespie Certificate Number: C20170118-0109 You may verify this certificate online at http://www.nvsos.gov/ IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on January 19, 2017.

Barbara K. Cegavske BARBARA K. CEGAVSKE Secretary of State

2160 Jun 341