M170000002598

(Requ	uestor's Name)	· ··-·
(Addi	ress)	
(Addı	ress)	·
(City/	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	

Office Use Only



800296605478

DEPARTMENT OF STATE



O SIMMONS MAR 2 8 2017 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 569805 4311305

AUTHORIZATION

COST LIMIT : \$ 160.00

ORDER DATE: March 24, 2017

ORDER TIME : 9:18 AM

ORDER NO. : 569805-005

CUSTOMER NO: 4311305

FOREIGN FILINGS

NAME: W25 RETAIL OWNER, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

PLAIN STAMPED COPY

XX ____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

TO:

Registration Section

Div	ision of Corporation	S					
SUBJECT:	W25 Retail Owner, LLC						
	Name of Limited Liability Company						
		eign Limited Liability Comp d to register the above refere					
Please return	all correspondence c	oncerning this matter to the	following:				
	Christopher W.	Smith					
	Name of Person						
	East End Capita	Il Partners, LLC					
	 	Firm/Company					
	600 Madison Avenue						
	Address						
	New York, New York 10022						
		City/Si	tate and Zip Code				
	csmith@eastendo	ap.com					
		E-mail address: (to be used	for future annual r	eport not	fication)	•	
For further i	nformation concerning	g this matter, please call:					
Ch	ristopher W. Smith		917 at (281-033)	13		
	Name o	f Contact Person	Area Code	Day	time 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 follow \$125.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Certified Copy	; Fee &	\$160.00 Filing Fee, Co of Status & Certified Co		

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. W25 Retail Owner, LL						
	rign Limited Liability Company; must include	"Limited Liability Company," "L.L.C.," or "LL	.C.")			
N/A						
(If name unavailable, enter al Liability Company," "L.L.C.	ternate name adopted for the purpose of trans " or "LLC.")	acting business in Florida. The alternate name in	nust include "Limited			
2. Delaware		N/A				
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)				
4. N/A						
	(Date first transacted business in Flor (See sections 605.0904 & 605.0905, F.)	rida, il prior to registration.) S. to determine penalty liability)				
5. c/o East End Capital Partners, LLC, 600 Madison Avenue, New York, New York 10022						
***************************************	(Street Address of Principal	Office)				
6. c/o East End Capital Pa	riners, LLC, 600 Madison Avenue, New	York, New York 10022				
	(Mailing Address)					
7 Name and street address	s of Florida registered agent: (P.O. Box	NOT countable))			
	Corporation Service Company	(NOT acceptable)				
Name:	1201 Hays Street		50 1			
Office Address:	Tallahassee	27301				
	(City)	, Florida 32301 (Zip code)	1 Page 1			
Registered agent's accep		(Zip code)	S.			
		rocess for the above stated limited liability				
		registered agent and agree to act in this count of my duties, are				
	ny position as registered agent.		sa Zender			
	M	The state of the s	ce President			
	(Registered ager	it's signature)	oc i resident			
8. The name title or cana	icity and address of the person(s) who has	s/have authority to manage is/are:				
	horized Signatory, East End Capital Partr					
New York, NY 10022, an	d David Peretz, Authorized Signatory, Ea	ast End Capital, 600 Madison Avenue.				
New York, NY 10022						
9. Attached is a certificate jurisdiction under the law of the translator must be su	of which it is organized. (If the certificate	duly authenticated by the official having cus is in a foreign language, a translation of the thorized person	tody of records in the e certificate under oath			
This document is executed submitted in a document to	in accordance with section 605.0203 (1) the Department of State constitutes a thin	(b), Florida Statutes. I am aware that any fa rd degree felony as provided for in s.817.15	lse information 5, F.S.			
	David Peretz	one of signal				

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "W25 RETAIL OWNER, 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-FOURTH DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "W25 RETAIL OWNER, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF MARCH, A.D. 2017.

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

Authentication: 202262255

Date: 03-24-17

6357608 8300 SR# 20172009228