

M17000003022

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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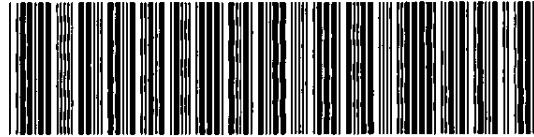
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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RECEIVED  
DEPARTMENT OF STATE  
17 APR - 7 PM 4:14  
2017 APR - 7 AM 7:37  
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DEPT. OF STATE  
TALLAHASSEE, FLORIDA

K. SALY

APR 10 2017

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 589650 4327683  
AUTHORIZATION : *[Signature]*  
COST LIMIT : \$ 155.00

ORDER DATE : April 7, 2017  
ORDER TIME : 3:47 PM  
ORDER NO. : 589650-005  
CUSTOMER NO: 4327683

FOREIGN FILINGS

NAME: LABB PROPERTY GROUP LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: \_\_\_\_\_

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Labb Property Group 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:

Anthony Iacovone

\_\_\_\_\_  
Name of Person

Labb Property Group LLC

\_\_\_\_\_  
Firm/Company

315 Main Street

\_\_\_\_\_  
Address

Huntington, NY 11743

\_\_\_\_\_  
City/State and Zip Code

tonyvone@gmail.com

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

For further information concerning this matter, please call:

Anthony Iacovone

516

812-6379

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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

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

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. Labb Property Group 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  
(Jurisdiction under the law of which foreign limited liability  
company is organized)

3. \_\_\_\_\_  
(FEI number, if applicable)

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

5. Labb Property Group LLC Attn: Anthony Iacovone, 315 Main Street  
Huntington, NY 11743  
(Street Address of Principal Office)

6. Labb Property Group LLC Attn: Anthony Iacovone, 315 Main Street  
Huntington, NY 11743  
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company  
Office Address: 1201 Hays Street  
Tallahassee, Florida 32301  
(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 comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and  
accept the obligations of my position as registered agent.

By: M. Zender Melissa Zender  
(Registered agent's signature) Asst. Vice President

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Anthony Iacovone, Manager, 315 Main Street, Huntington, NY 11743

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]  
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.

Anthony Iacovone

Typed or printed name of signee

2011 APR -7 AM 7:31  
- L E D  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# State of New York Department of State } ss:

I hereby certify, that AJI PROPERTY GROUP LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 01/24/2017, and that the Limited Liability Company is existing so far as shown by the records of the Department.

A Certificate of Amendment AJI PROPERTY GROUP LLC, changing its name to LABB PROPERTY GROUP LLC, was filed 03/20/2017.



\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 06th day of April  
two thousand and seventeen.*

Brendan W. Fitzgerald  
Executive Deputy Secretary of State

FILED  
2017 APR -7 AM 7:37  
STATE OF NEW YORK  
TALLAHASSEE, FLORIDA