M17000003459

(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: 33272							

Office Use Only



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SECRETARY OF STATE

S Warren APR 2 4 2017



April 18, 2017

EKREM ILHAN 11 AVENUE AT PORT IMPERIAL, APT. 1209 WEST NY, NJ 07093

SUBJECT: E&I TRADING LIMITED LIABILITY COMPANY

Ref. Number: W17000033272

We have received your document for E&I TRADING LIMITED LIABILITY COMPANY and your check(s) totaling \$160.00. However, the enclosed document has not been filed 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.

The document number of the name conflict is L15000025943 AEI TRADING, LLC.

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.

Stacey M Warren Regulatory Specialist II

Letter Number: 917A00007521

www.sunbiz.org

COVER LETTER

TO:	Registration Section Division of Corporatio	ns						
SUBJE	E&I TRADING LI	MITED LIABILITY COMPA	NY					
501161		Name of I	Limited Liability (Company				
		reign Limited Liability Comp ed to register the above refere						
Please	return all correspondence	concerning this matter to the	following:					
	EKREM ILHA	.N						
Name of Person								
	E&I TRADING LIMITED LIABILITY COMPANY							
	Firm/Company							
	II AVENUE AT PORT IMPERIAL, APT 1209							
Address								
	WEST NY, NJ	WEST NY, NJ 07093						
City/State and Zip Code								
ekremilhan@gmail.com								
		E-mail address: (to be used	l for future annual	report not	ification)			
For furt	her information concerning	ig this matter, please call:						
	EKREM ILHAN		201 at (245263	0			
	Name o	of Contact Person	Area Code	Day	time Telephone Number			
	MAILING ADDRESS: Division of Corporation: Registration Section P.O. Box 6327 Tallahassee, F1, 32314			Division (Registrati Clifton B 2661 Exe	CADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301			
Enclose	ed is a check for the follow \$125.00 Filing Fee	zing amount; ☐ \$130.00 Filing Fee & Certificate of Status	S155,00 Filir Certified Copy	ng Fee &	■ \$160,00 Filing Fee, Co of Status & Certified Cop			

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:

I	ED LIABILITY COMPANY eign Limited Liability Company; m	ast include "Limited Liability	Company," "L.L.C.," or	"LI.C.")			
(If name unavailable, enter a	lternate name adopted for the purpo	se of transacting business in	Florida. The alternate nam	ne must include "Limited			
Liability Company," "L.L.C.	" or "LLC.")						
2. NEW JERSEY		3. 46-4789988	El number, if applicable				
(Jurisdiction under the law company is organized))						
4. 04/19/2017							
	(Date first transacted busin (See sections 605.0904 & 605	ess in Florida, if prior to region 1905, F.S. to determine pen	stration.) alty liability)	_			
5 11 AVENUE AT POR	T IMPERIAL, WEST NEW YO						
APT 12	17 SE SE						
	(Street Address of	Principal Office)		- CR 4			
6. 11 AVENUE AT POR	CIMPERIAL WEST NEW YO			R2			
APT 12	APT 1209						
	(Mailing	Address)					
7 Nama and atreat address				STA STA			
7. Name and <u>suggradures</u>	ss of Florida registered agent: (I	'.O. Box NOT acceptable)	6 6			
Name:	EKREM ILHAN						
Office Address:	1900 TAMIAMI TRAIL N						
	NAPLES	, F	lorida 34102				
Registered agent's accep	(City)		(Zip code)	_			
Having been named as re designated in this applica to complywith the provisi	gistered agent and to accept sertion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent	ntment as registered agent o <u>proper a</u> nd complete per > .	and agree to act in th	is capacity. I further agree			
	(Regis	tered agent's signature)					
8. The name, title or capa	icity and address of the person(s) who has/have authority (o manage is/are:				
EKREM ILHAN, MEMB	ER						
11 AVENUE AT PORT 1	MPERIAL, WEST NEW YORK	ζ, NJ 07093					
9. Attached is a certificate jurisdiction under the law of the translator must be so	of existence, no more than 90 d of which it is organized. (If the abmitted)	ays old, duly authenticated sertificate is in a foreign la	I by the official having nguage, a translation o	custody of records in the fifthe certificate under oath			
	Signature	e of an authorized person	· · · · · · · · · · · · · · · · · · ·	_			
This document is executed submitted in a document to	l in accordance with section 605. the Department of State constit	0203 (1) (b), Florida Statu utes a third devree felooy :	ites. I am aware that an	y false information 7.155, F.S.			

Typed or printed name of signee

EKREM ILHAN

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

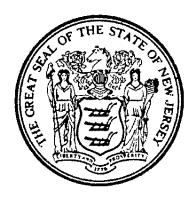
E&I TRADING LIMITED LIABILITY COMPANY 0400634579

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on February 11, 2014.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

EKREM ILHAN 11 AVENUE AT PORT IMPERIAL WEST NEW YORK, NJ 07093



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 12th day of April, 2017

Ford M. Scudder Acting State Treasurer

Certificate Number: 6079010312

Verify this certificate online at

https://www.l.state.m.us/TYTR_StandingCert/JSP/Verify_Cert.jsp