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(((H170001130183)))



H170001130183ABCW

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Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name

Account Number: 072450003255

: (305) 634-3694

Fax Number

: (305)633-9696

EATer the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## Foreign Limited Liability Company **KEN 21ST LLC**

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PAGE 01/05



May 1, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORP USA

SUBJECT: KEN 21ST LLC REF: W17000035800

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$1193.75.

Please return your document, along with a copy of this letter, within 600 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II FAX Aud. #: H17000113018 Letter Number: 517A00008428

P.O BOX 6327 - Tallahassee, Florida 32314

May 2, 2017

Florida Dept. of State Division of Corporations

Re:

Ken 21ST LLC

Gentlemen:

Please be advised that the date of November 7, 2012, was inadvertently inserted on the form.

Very truly yours,

ISAAC GOLAN

SWORN TO AND SUBSCRIBED BEFORE ME

this 2<sup>nd</sup> day of May, 2017.

**Notary Public** 

DIANA CRUZ

MY COMMISSION # FF 946088

EXPRES: February 23, 2020

Sometime This Burgan Noticy Sendant

FILEU FILEU FICHUS

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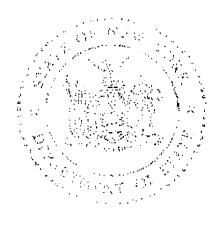
## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 603,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Kl Washi	ness adopted for the purpose of transacting business in Flo		obility Company," "LL.C," or "LLC,")
New York		3. 11-3413376	iber, if applicable)
() កំណុចព្រះស្រាប់ ការដូចត ល្ខាន កុខស ០៩ អាវិ	uch Review limited liability company is organized)	ft <b>21</b> 3min	and, or references,
1			
	(Date first transported business in Florida, if provide (See accident 601.0904 & 603.0905, F.S. to determine	and bearify lispility)	
5. 4450 S. Pine Island		6. 4450 S. Pine Island Ro	pad
(Street Address of P.	Historial Office)	Davie, FL 33378	doess)
Davie, FL 33378		D840, 12 00010	
7. Name and street address	g of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	Stewart M. Mirmelli, Esq.		
Office Address:	340 W. Flagler Street, #209	<del></del>	
	Miami	, Florida 33130	
	ions of all statutes relative to the proper	, maket da kulturan bandara marana albanda	
mum interior rise ansituminal	s of my position as registered agent. [Registered agents	algunte)	·· <del>·</del>
	- Muull	_	Name and Address:
8. The name, title or caps	(Reginered agent's acity and address of the person(s) who h	as/have authority to manage is/are:	Name and Address:
8. The name, title or caps Title or Capacity:	(Registered agent's active and address of the person(s) who be Nieme and Address;  Isaac Golan  4450 1 Pre-based foxed	as/have authority to manage is/are:	Name and Address:
8. The name, title or caps Title or Capacity:	toity and address of the person(s) who have and Address; Isaac Golan	as/have authority to manage is/are:	Name and Address:
8. The name, title or caps Title or Capacity:	(Registered agent's active and address of the person(s) who be Nieme and Address;  Isaac Golan  4450 1 Pre-based foxed	as/have authority to manage is/are:	20 3 T
8. The name, title or caps Title or Capacity:	(Reginered agent's acity and address of the person(s) who have and Address; Isaac Golan 455 1 Fire learn food Devia, FL 33328	as/have authority to manage is/are:	25 W 7: 5
8. The name, title or capa Title or Caparity: General Manager  (Use attachments if necess) 9. Attached is a certificate	Isaac Golan  450 1 Mere hand food  Davis, Fl. 3352a  sary)  of existence, no more than 90 days old, of which it is organized. (If the certifical	as/have authority to manage is/are:  Title or Capacity:  duly authoricated by the official h	25 T
8. The name, title or caps  Title or Caparity:  General Manager  (Use attachments if necess 9. Attached is a certificate jurisdiction under the law of the translator must be su  10. This document is executed.	Isaac Golan  459 1 Mee hand fond  Devic R. 33328  sary)  of existence, no more than 90 days old, of which it is organized. (If the certificate abmitted)	duly authenticated by the official he is in a foreign language, a translator and authorized person	aving custody of records in the tion of the certificate under oath

## State of New York Department of State } ss:

I hereby certify, that KEN 218T LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 12/12/1997, 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 19th day of April two thousand and seventeen.

Brendan W. Fitzgerald Executive Deputy Secretary of State

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