M17000004200

(Re	questor's Name)				
(Address)					
(Ad	dress)				
(City/State/Zip/Phone #)					
PICK-UP	MAIT	MAIL			
(Bu	siness Entity Nar	me)			
(Do	cument Number)				
Certified Copies	_ Certificates	s of Status			
Special Instructions to	Filing Officer:				
		,			





200298520092

04/28/17--01021--018 **130.00

05/18/17--01001--003 **638.75

FILED 2:50

D. SCOTT MAY 1 7 2017 Arr. Komm



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 2, 2017

HOWARD FRIEDMAN 942 LAFAYETTE AVE BROOKLYN, NY 11221

SUBJECT: F3 SYRUP LLC Ref. Number: W17000037745

We have received your document for F3 SYRUP LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 \$638.75.

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.

Dionne M Pijeaux Regulatory Specialist

Letter Number: 917A00008606

COVER LETTER

TO:

Registration Section

Division of Corporation	ns						
SUBJECT: F3 SYRUP LLC							
Name of Limited Liability Company							
The enclosed "Application by For Existence, and check are submitted							
Please return all correspondence	concerning this matter to the	following:					
Howard Fried	dman						
	N	ame of Person					
F3 Syrup LLC				ન્યું છે. જે લ			
	Fi	rm/Company					
942 Lafayett	e Ave			智温			
		Address					
Brooklyn, NY				PH 21			
	City/S	tate and Zip Code	:	97 S			
george@afsupp							
	E-mail address: (to be used	for future annual	l report notification)	<u> </u>			
For further information concerning	g this matter, please call:			-			
Howard Friedman		at (917	863-1665				
Name o	of Contact Person	Area Code	Daytime Telephone N	um			
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 Circ Tallahassee, FL 32301	ele 🍱			
Enclosed is a check for the follow ☐ \$125.00 Filing Fee	ing amount: \$\int \\$130.00 \text{ Filing Fee & Certificate of Status}	□ \$155.00 Filit Certified Copy		g Fee, Certificate ified 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:

COMPANYTOTRANSACTBU	JSINESS IN THE STATE OF FLORIDA	:		
1. F3 SYRUP LLC				WI I (2.1)
(Name of For	eign Limited Liability Company; mus	it includ	de "Limited Liability Company," "L.L.C.," o	or "LLC.")
(If name unavailable, enter a Liability Company," "L.L.C,	Iternate name adopted for the purpose " or "LLC.")	of tran	sacting business in Florida. The alternate n	ame must include "Limited
2. State of New Jersey		3.	47-1240064	
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if applicable	e)
4. 11/01/2016				
	(Date first transacted busine (See sections 605.0904 & 605.	ss in Flo 0905, F	orida, if prior to registration.) ".S. to determine penalty liability)	
5. 942 Lafayette Ave				
Brooklyn, NY 11221				一道美工
210010311,111 11221	(Street Address of F	rincipa	l Office)	- 24 = F
6. 942 Lafayette Ave				0 1
Brooklyn, NY 11221				
BIOOKIYII, IVI 11221	(Mailing /	Address))	- 2: 50 - 2: 50
7. Name and street addres	ss of Florida registered agent: (P.	O. Box	NOT acceptable)	
Name:	Registered Agents Inc.		,	
	3030 N. Rocky Point Dr. ST	= 150/	<u> </u>	
Office Address:	3030 N. NOCKY FUIL DI. 311	_ 1002	1	
	Tampa		, Florida <u>33607</u>	_
Registered agent's accep	(City)		(Zip code)	
Having been named as re	gistered agent and to accept serv		process for the above stated limited lia	
			s registered agent and agree to act in t and complete performance of my dution	
	my position as registered agent.			
	Bel	\mathcal{H}_{-}	···	. •
	(Registe	red age	ent's signature)	
8. The name, title or capa	acity and address of the person(s)	who ha	as/have authority to manage is/are:	i
Howard Friedman, Me	ember		, ,	
942 Lafayette Ave				· ·
Brooklyn, NY 11221				
	of which it is organized. (If the co	rtificat	duly authenticated by the official having e is in a foreign language, a translation	
	//www.	1	Um	_
	Signature	of an au	thorized person	
) (b), Florida Statutes. I am aware that a ird degree felony as provided for in s.81	
	Howard	LEriod	lman	

Typed or printed name of signee

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

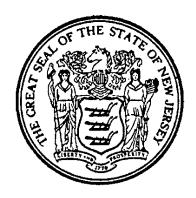
F3 SYRUP LLC 0400670324

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 July 01, 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:

HOWARD FRIEDMAN 1000 SOUTH 2ND ST HARRISON, NJ 07029



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 17th day of April, 2017

Ford M. Scudder Acting State Treasurer

Certificate Number: 6079088700

Verify this certificate online at

 $https://wwwI.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp$

