## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000150710 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number: I20080000067

: (845)425-0077

Fax Number

: (845)818-3588

Enter the email address for this business entity to be used for fature en mainnual report mailings. Enter only one email address please.

## Foreign Limited Liability Company **ASRR 18 LLC**

Certificate of Status	4	)
Certified Copy		)
Page Count	0	2
Estimated Charge	\$12	5.00

JUN 1 6 2017

Y SULKER

Electronic Filing Menu

Corporate Filing Menu

Help



June 7, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

VCORP SERVICES, LLC

SUBJECT: ASRR 18 LLC REF: W17000047911

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.

The registered agent must sign accepting the designation.

If you have any further quastions concerning wour document, please call (850) 245-6051.

Dionne M Pijeaux Regulatory Specialist Registration Section FAX Aud. #: H17000150710 Letter Number: 117A00011430

## 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. ASRR 18 LLC				
(Name of Fort	sign Limited Liability Company; must in	iclude "Limited Libbi!	ity Company," "L.L.C.," or	"LLC.")
(If name unavailable, enter al Liability Company," "L.L.C.	liernate name adopted for the purpose of	trunsocting business	in Floride. The sitemate no	ne must include "Limited
2 DB	or coc. y	•		
CAMPACICATION FAIRER (UP 1944)	of which foreign limited liability	3	(FEI number, If applicable	
company is organized)			•	
4,	(Date first transacted business to	n Florida, if prior to re	eistration.)	-
261 Madiana Assuma	(See sections 603,0904 & 605,090	55, F.S. to determine p	enalty liability)	
5. 201 Medison Aveaue,	27th Floor, New York, NY 10016			<b></b>
<u> </u>	(Street Address of Prins	cipal Office)	<u>.</u>	_
6. 261 Madison Avenue,	27th Floor, New York, NY 10016			_
	(Mail(ing Add	(max)		<del></del>
7 Name and street address	s of Florida registered agent: (P.O. )		(ale	<b>3</b>
	Vooro Services, LLC	50x <u>1151</u> 3000p1111	,	Eő 🕏
Name:				
Office Address:	5011 South State Road 7, Suite 100	0		SS.F
	Davie		, Florida <u>33314</u>	اللبير مع أبي
Registered agent's accep	(City)		(Zip code)	37 <b>3</b> 17
Having been named as re-	gistered agent and to accept service	of process for the	above stated corporation	at the place designated in
this application, I hereby	accept the appointment as registered statutes relative to the proper and co	ed agent and agree :	to act in this capacity. I ,	further expert to comply
the obligations of my posi		ompiete perjorman	ce of my annes, and I un	Davuliël min n <b>di</b> kteeth
• • • • • • • • • • • • • • • • • • • •				
	(Registered	d agent's signature)		-
2. The name, title or cans	soity and address of the person(s) wh	io has/bave authorit	v to manage is/are:	
	Avenue, 27th floor, New York, NY		,	
<del></del>	hem Begin Way, Tel Aviv Israel 671			<del></del>
		<i>j</i>	<del></del>	
		<del>-/</del>		<del></del>
<ol> <li>Attached is a certificate jurisdiction under the law of the translator must be st</li> </ol>	of existence, no more than 90 days of which it is organized. (If the certification)	od, duly authenticat Scate is in a foreign	ed by the official having language, a translation o	custody of records in the fithe certificate under oath
	Signature of p	n authorized person	<del></del>	-
	In accordance with section 605.028 the Department of State constitute			
	Alex Sapir , Manager		F	
		ed name of signee		-

## Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ASRR 18 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 FIRST DAY OF JUNE, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ASRR 18 LLC" WAS FORMED ON THE THIRD DAY OF FEBRUARY, A.D. 2016.

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

Authentication: 202635275

Date: 06-01-17

5954351 8300 SR# 20174507561