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2017 Aug 23 (5) 4: 34

S. WARREN AUG 2 4 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 120000000195

REFERENCE : 781117 7161018

AUTHORIZATION COST LIMIT : \$, 125.00

ORDER DATE : August 23, 2017

ORDER TIME : 3:28 PM

ORDER NO. : 781117-005

CUSTOMER NO: 7161018

FOREIGN FILINGS

NAME: ELLENTON LIFESTYLES LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

COVER LETTER

	Registration Section Division of Corporations				
_	Ellenton Lifestyles LLC				
SUBJEC	Name of Limited Liability Company				
The enclo Existence	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of e, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida				
Please re	turn all correspondence concerning this matter to the following:				
	Marc D. Leve				
	Name of Person				
Sills Cummis & Gross P.C.					
	Firm/Company				
	101 Park Avenue, 28th Floor				
	Address				
	New York, NY 10178				
	City/State and Zip Code				
	mleve@sillscummis.com				
	E-mail address: (to be used for future annual report notification)				
For furth	er information concerning this matter, please call:				
	Marc D. Leve at (212) 500-1591 Name of Contact Person Area Code Daytime Telephone Number				
•	Name of Contact Person Area Code Daytime Telephone Number				
1 1	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Clifton Building Tallahassee, Fl. 32314 Z661 Executive Center Circle Tallahassee, FL 32301				
	ed is a check for the following amount: State State State State Certificate of State Sta				

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:

Ellenton Lifestyles LLC	
(Name of Foreign Limited Liability Company: must include "Limited Liability Company," "L.L.C.," o	r"LLC.")
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate a Liability Company," "L.L.C." or "L.L.C.")	ame must include "Limited
Delaware 3	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applic company is organized)	able)
August 15, 2017	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
850 Paterson Plank Road	
Secaucus, New Jersey 07094	
(Street Address of Principal Office)	
850 Paterson Plank Road	
Secaucus, New Jersey 07094	
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to m	nanage is/are:
Michael J. Setola, Authorized Person, Tharanco Retail LLC, 850 Paterson Plank Road, Secaucus,	New Jersey 07094
Scott Kane, Authorized Person, Tharanco Retail LLC, 850 Paterson Plank Road, Secaucus, I	New Jersey 07094
8. Attached is an original certificate of existence, no more than 90 days old, duly authen	iticated by the official
having custody of records in the jurisdiction under the law of which it is organized. (A p	photocopy is not
acceptable. If the certificate is in a foreign language, a translation of the certificate undemust be submitted)	r oath of the translator
Subth.	
Signature of an authorized person	-
In accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury on aware that any false anformation submitted in a document to the Department of State constitutes a third degree felony as provid	
Scott Kane	AUG 7
Typed or printed name of signee	F -L
	23 #
	5- 9
	新 25 图

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d). FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

The name of the Limited Liability Company is: Ellenton Lifestyles LLC							
If unavailable	the alternate to be used in the st	tate of Florida is:					
2. The name a	and the Florida street address of	the registered agent and office are:					
	Corporation Service Company						
	(Name)						
	1201 Hays Street						
	Florida Street Address (P.O. Box NOT ACCEPTABLE)						
	Tallahassee	32301 FL					
		City/State/Zip					
liability compo registered age statutes relatir	my at the place designated in this at and agree to act in this capaci g to the proper and complete per	accept service of process for the abo s certificate, I hereby accept the appo iy. I further agree to comply with the rformance of my duties, and I am fan red agent as provided for in Chapter	ointment as e provisions of all niliar with and				
	By:	M. Facility Ass	il. Vice 1100				
	\$ 100.00 \$ 25.00 \$ 30.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)	17 AUG 23 AM 9: 2				

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ELLENTON LIFESTYLES 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 TWENTY-THIRD DAY OF AUGUST, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ELLENTON

LIFESTYLES LLC" WAS FORMED ON THE FIFTEENTH DAY OF AUGUST, A.D.

2017.

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

Authentication: 203106703

Date: 08-23-17

6512401 8300 SR# 20175853586