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	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
	JP WAIT MAIL
	(Business Entity Name)
	(Document Number)
ertified Copies	Certificates of Status
Special Instructio	ns to Filing Officer:
	Office Use Only



ALLAHASSEE, FLORIDA

2217 no. 2 3 4: 4: 34

N RRUCE

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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	ACCOUNT NO.	:	120000000	L95		
	REFERENCE	:	781117	7161018	}	
	AUTHORIZATION	يل:	The a			
	COST LIMIT	0	\$ 125.00	ran		
ORDER DATE :	August 23, 2017					
ORDER TIME :	3:30 PM					
ORDER NO. :	781117-020					
CUSTOMER NO:	7161018				2017 SEC7	-
	<u>FOREIGN</u> F	<u>'TLT'</u>	<u>NGS</u>			
NAME :	DESTIN LIFESI	YLE	5 LLC			D

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

TO: Registration Section Division of Corporations

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SUBJECT: Destin Lifestyles LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Marc Lo	eve				
	N	lame of Person			
Sills Cu	immis & Gro	ss P.C.			
	³	irm/Company			
101 Pa	rk Avenue, 2	8th Floor			
		Address			
New Yo	ork, NY 1017	8	IALL	2017	
	City/S	itate and Zip Code	A H	1.11	-11
mleve@	sillscummis	.com	A 5 S	5 5 2 2 2	
	E-mail address: (to be use	d for future annual report notifi	cation)		, TT
For further information concernin,	g this matter, please call:		TLO		D
Marc Leve			01591 🛒	:: t 0	
Name o	d Contact Person	Area Code D	aytime Telephone Num	ber	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327	Divisia Registr Clifton	ET ADDRESS: n of Corporations ation Section Building			
Tallahassee, FL 32314		xecutive Center Circle issee, FL 32301			
Enclosed is a check for the f	ollowing amount:	□ \$155.00 Filing Fee &	🗆 \$160.00 Filing	Fee Certific	ate
a arza.oo runng ree	Certificate of Status	Certified Copy	of Status & Ce		
	•				

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:

L Destin Lifestyles LLC

(Name of Forcign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC,")

Delaware 2.

3. (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)

August 15, 2017 4

(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) 6. 850 Paterson Plank Road	AHAS T
Secaucus, New Jersey 07094	
(Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have aut	hority to manage istare:

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, New Jersey 07094

8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

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 that the facts stated berein are true, 1 am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$ \$17,155, F S.)

Scott Kane

Typed or printed name of signee

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.

1. The name of the Limited Liability Company is:

Destin	Lifestyles	LLC
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If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Cor	npany	AHA	l YAR	
(Name)		ASSE:	22	Γ
1201 Hays Street			IJ	ר ר
Florida Street Address (P.O. Box NOT ACCEPTABLE)			۲. ۲	م
Tallahassee	32301 FL	7 -	0	
	City/State/Zip			

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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

Corporation Service	Company	A Asst. Vice President
By:	-71	Asst. Vice Tresident
	(Signa)	with the construction of t
	\$ 100.00	Filing Fee for Application
	\$ 25.00	Designation of Registered Agent
	\$ 30.00	Certified Copy (optional)
	\$ 5.00	Certificate of Status (optional)



The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DESTIN 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 "DESTIN 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.



ch, Secretary of State W. 8.

Authentication: 203106707

Date: 08-23-17

Page 1

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SR# 20175853590 You may verify this certificate online at corp.delaware.gov/authver.shtml