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COVER LETTER

TO:	Registration Section Division of Corporati	ons						
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SUBJ	SUBJECT:Name of Limited Liability Company							
The en Exister	closed "Application by F nce, and check are submit	oreign Limited Liability Conted to register the above reference	mpany for Authoris	zation to T nited liabili	ransact Business in Flo ity company to transact	rida," Certi business in	ificate of Florida.	
Picase	return all correspondence	e concerning this matter to the	ne following:					
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	Division of Corporation				of Corporations			
	Registration Section				tion Section			
	P.O. Box 6327 Tallahassee, FL 32314				Building ecutive Center Circle see, FL 32301			
Enclose	d is a check for the follow	ving amount:			_			
	□ \$125.00 Filing Fee	☐ \$130.00 Filing Fec & Certificate of Status	☐ \$155.00 Fili Certified Copy	_	\$160.00 Filing Fo	e, Certifica i Copy	ite	

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

IN COMPLIANCE WITH SECTION 605 0902, FLORIDA STATUTIES, THE FOLLOWING IS SUBMITTED TO REGISTER A POREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: KING AUGUSTINE POOH, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LUC.") (If name unavailable, orner atternate rasms adopted for the purpose of transacting business in Florida. The aberrate cause crust include "Limited Liability Company," "L.L.C." or "LLC.") DELAWARE 3. 82-2843510 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) 6. 101 WEST 55TH STREET, NY 10019 5. 101 WEST 55TH STREET, NY 10019 (Street Address of Principal Office) (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) National Registered Agents, Inc. Name: 1200 South Pine Island Road Office Address: Plantation Registered agent's acceptance: 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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with... and accept the obligations of my position as registered agent/ 8. The name, title or capacity and address of the person(s) who has have authority to manage is/are: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Managing Member Donald Zucker (Use attachments if necessary) 9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third the felony as provided for in s.817.155, F.S. Daniel F. Sullivan, Authorized Person

Typod or printed name of signer

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KING AUGUSTINE POOH, 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 TWENTIETH DAY OF SEPTEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KING AUGUSTINE POOH, LLC" WAS FORMED ON THE NINETEENTH DAY OF SEPTEMBER, A.D. 2017.

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

6548193 8300 SR# 20176257748

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

Authentication: 203261278

Date: 09-20-17