

M17000008261

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

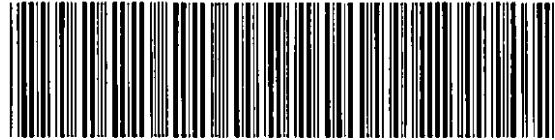
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Certificates of Status _____

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17 SEP 27 AM 8:49

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Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.Incserve.com
e-mail: info@incserve.com

incserve

File
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10+2

ORDER FORM

TO Florida Department of State
Division of Corporations, Clifton
Building
2661 Executive Center Circle
Tallahassee, FL 32301
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Stops
mstops@incserve.com
850.656.7953

REQUEST DATE 9/27/2017

PRIORITY Routine

OUR REF # (Order ID#) 601024

ORDER ENTITY

STUDIO DANIEL LIBESKIND, ARCHITECT LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

STUDIO DANIEL LIBESKIND, ARCHITECT LLC (FL)

File the attached foreign qualification document

Short Form Good Standing Certificate

NOTES:

\$130.00 Authorized

Email address for annual report reminders: carla@libeskind.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Melissa

17 SEP 27 AM 8:49
TALLAHASSEE, FLORIDA

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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. STUDIO DANIEL LIBESKIND, ARCHITECT LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

(If none available, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")

2. NEW YORK STATE

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 80-0063503

(FEI number, if applicable)

4. N/A

(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 150 Broadway

(Street Address of Principal Office)

18TH FL.

NEW YORK, NY 10038

6. 150 Broadway

(Mailing Address)

18 FL.

NEW YORK, NY 10038

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Timothy Clemmons

Office Address: 33 6th St. S. Suite 400

St. Petersburg,

(City)

11

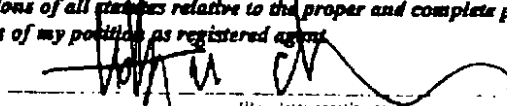
Florida

33701

(Zip code)

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.



(Registered agent's signature)

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:

Owner

Daniel Libeskind
150 Broadway 18th Fl
NY NY 10038

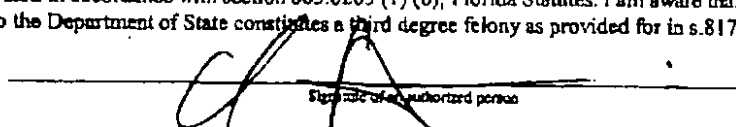
CEO/Principal

Carla Swickerath
150 Broadway 18th Fl
NY NY 10038

(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 degree felony as provided for in s.817.155, F.S.



CARLA SWICKERATH
Typed or printed name of signer

State of New York
Department of State } **ss:**

I hereby certify, that STUDIO DANIEL LIBESKIND, ARCHITECT LLC a NEW YORK Professional Service Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 10/02/2003, and that Professional Service Limited Liability Company is existing so far as shown by the records of the Department.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 26th day of September
two thousand and seventeen.*

Brendan W. Fitzgerald
Executive Deputy Secretary of State

201709270047 * 30

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F.I.L.
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