

M17000000 8613

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(City/State/Zip/Phone #)

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(Business Entity Name)

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STATE OF FLORIDA

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 26, 2017

JAY L LUBETKIN, ESQ  
293 EISENHOWER PARKWAY STE 100  
LIVINGSTON, NJ 07039

SUBJECT: FLAGSHIP ASSOCIATES, LLC  
Ref. Number: W17000074031

We have received your document for FLAGSHIP ASSOCIATES, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

Please accept our apology for failing to mention this in our previous letter.

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker  
Regulatory Specialist II

Letter Number: 117A00018763

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2017 OCT -6 PM 12:32  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:**     Registration Section  
          Division of Corporations

**SUBJECT:**   Flagship Associates, 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:

Jay L. Lubetkin, Esq.

\_\_\_\_\_  
Name of Person

Rabinowitz, Lubetkin & Tully, LLC

\_\_\_\_\_  
Firm/Company

293 Eisenhower Parkway, Suite 100

\_\_\_\_\_  
Address

Livingston, New Jersey 07039

\_\_\_\_\_  
City/State and Zip Code

jlubetkin@rtlawfirm.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jay L. Lubetkin

973

597-9100

\_\_\_\_\_  
Name of Contact Person

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

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. Flagship Associates, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")  
New Jersey Flagship Associates, 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.")
2. New Jersey 3. 22-2875318  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 556 Main Street 6. 556 Main Street  
(Street Address of Principal Office) (Mailing Address)  
Orange, New Jersey Orange, NJ 07050  
07050

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

Name: Andy Talbert  
Office Address: 16239 Pantheon Pass  
Delray Beach, Florida 33446  
(City) (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 in full faith with and accept the obligations of my position as registered agent.

Charles Lubetkin  
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Managing Member</u>	<u>Charles Lubetkin</u> <u>One Claridge Drive, Apt. 707</u> <u>Verona, NJ 07044</u>		
<u>Managing Member</u>	<u>Stephen Weintraub</u> <u>39 Tillou Road West</u> <u>South Orange, NJ 07079-1357</u>		

(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.

Charles Lubetkin  
Signature of an authorized person

Charles Lubetkin

Typed or printed name of signer

**STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY  
DIVISION OF REVENUE AND ENTERPRISE SERVICES  
SHORT FORM STANDING**

**FLAGSHIP ASSOCIATES, LLC**

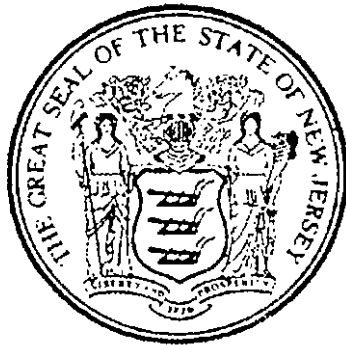
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*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on October 23, 2007.*

*As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.*

*I further certify that the registered agent and office are:*

JAY LUBETKIN ESQ  
RABINOWITZ, LUBETKIN & TULLY LLC  
293 EISENHOWER PKWY, STE 100  
LIVINGSTON, NJ 07039



*IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed  
my Official Seal at Trenton, this  
3rd day of October, 2017*

*Ford M. Scudder  
Acting State Treasurer*

Certificate Number : 6082964280

Verify this certificate online at

[https://www1.state.nj.us/TYTR\\_StandingCert/JSP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp)