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PICK-UP WAIT MAIL						
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Certified Copies Certificates of Status						
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Special Instructions to Filing Officer:						
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Office Use Only



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TO 14 TON

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 120000000195

REFERENCE : 908791 4307468

AUTHORIZATION : THE BELL MARKET

COST LIMIT : \$ 155.00

\_\_\_\_\_

ORDER DATE: November 13, 2017

ORDER TIME : 3:05 PM

ORDER NO. : 908791-005

CUSTOMER NO: 4307468

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#### FOREIGN FILINGS

NAME: DENHOLTZ SILVERSTAR LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT#

EXAMINER:

#### COVER LETTER

Registration Section

TO:

Division of Corporations							
SUBJECT:	Denholtz Silverstar	LLC					
Sobstic I.		Name of Limited Liability Company					
The enclosed Existence, ar	d "Application by For and check are submitted	eign Limited Liability Comp d to register the above refere	any for Authoriza	tion to Tra ed liability	nsact Business in Florida," ( company to transact busine	Certificate of ss in Florida.	
Please return	all correspondence c	oncerning this matter to the	following:				
	Lisamarie Gora, Esq.						
	Name of Person						
	Wilentz, Goldman & Spitzer, P.A.						
	Firm/Company						
	90 Woodbridge Center Drive, Suite 900 Box 10						
	Address						
	Woodbridge, NJ 07095						
City/State and Zip Code							
	lgora@wilentz.co	om					
	E-mail address: (to be used for future annual report notification)						
For further in	nformation concerning	g this matter, please call:					
Eri	c Finkelstein, Esq.		732 at (	855 <b>-</b> 608			
	Name o	f Contact Person	Area Code	Day	time Telephone Number		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314				Division of Registrati Clifton Bo 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301		
	a check for the follow \$125.00 Filing Fee	ing amount:  \$\Bigcup \text{\$\subset\$130.00 Filing Fee & Certificate of Status}\$	圖 \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Cer 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. Denholtz Silverstar LL (Name of Foreign	C Limited Liability Company; must include "Limite	d Liability Company," "L.L.C.," or "LLC.")					
	aune adopted for the purpose of transacting business in Flo	·	No. Compan. 8 N I C " or "11 C "				
	aine adopted for the purpose of transacting business in Pio	rain. The atternate name transt attained. Limited Land	inty company. Line, or 120.				
2. Delaware		3.	er, if applicable)				
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(Ptu numo	er, it applicators)				
4. N/A							
4.	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determine	registration.)					
5. c/o Denholtz Associate	es	6. c/o Denholtz Associates (Mailing Addr	)				
14 Cliffwood Avenue.			14 Cliffwood Avenue, Suite 200				
			Matawan, New Jersey 07747				
Matawan, New Jersey	0//4/	Madawan, New Jersey 0774	7				
7. Name and street address	ss of Florida registered agent: (P.O. Box	: <u>NOT</u> acceptable)					
Name:	Corporation Service Company						
Office Address:	1201 Hays Street						
	Tallahassee	Worlda 32301					
	(City)	, Florida 32301 (Zip code	<del>)</del>				
to comply with the provise	tion, I hereby accept the appointment a tions of all statutes relative to the proper s of my position as registered agent.  Corporation Service Company By:	and complete performance of my o	luties, and I am familiar with				
	By: (Registered agent's	signature) ASST. Vice Preside	nt .				
n eri							
8. The name, title or cap: Title or Capacity:	acity and address of the person(s) who han and Address:	Title or Capacity:	Name and Address:				
Title of Capacity.	<del></del>	Title of Capacity.	1- % = =				
Manager	Steven J. Denholtz						
	14 Cliffwood Avenue, Suite 2 Matawan, New Jersey 07747	<u>20</u> 0					
	Watawan, New Jersey 07/47	<del>-</del>					
		<del>-</del> -					
4-7	<del></del>		불士 9				
(Use attachments if neces	sary)		₩ ~ ~				
9. Attached is a certificate jurisdiction under the law of the translator must be s	of existence, no more than 90 days old, of which it is organized. (If the certificat ubmitted)	duly authenticated by the official hate is in a foreign language, a translati	ving custody of records in the on of the certificate under oath				
10. This document is exec submitted in a document to	uted in accordance with section 605.020 the Department of State constitutes at h	3 (1) (b), Florida Statutes. I am awar ird degree felony as provided for in:	e that any false information s.817.155, F.S.				
	- Vienshire	of an authorized person	<del></del>				
	() status						
	Lisan	MARIE GOVA, ESq.	<del></del>				
	Typed or	r printed name of signee					

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "DENHOLTZ SILVERSTAR 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 TENTH DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DENHOLTZ SILVERSTAR LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF AUGUST, A.D. 2017.

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

Authentication: 203553620

Date: 11-10-17