Dec. 1. 2017 9:13AMions GERALD WEINGERG



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170003147143)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

10:

Division of Corporations Fax Number : (850)617-6383

Erom:

Account Name : GERALD WEINBERG, P.C. Account Number : 120030000043 Phone : (800) 342-9856 Fax Number : (\$00)354-3381

\*\*Enter the email address for this business entity to be used for futured annual report mailings. Enter only one email address please.\*\* DEC

Email Address:



Electronic Filing Menu

Corporate Filing Menu

Help

## Dec. 1. 2017 9:13AM HGERALD WEINGERG /4 714 APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

## 1 TETK MANAGEMENT LLC

.

f name unavailable, enter alternate (	name adopted for the purpose of transacting business in Flor	ida. The alternate name must include "Limited Liability Comp	uny," "L.L.C," or "L
NEW YORK		3.	
(Jurisdiction under the law of w	thich foreign limited liability company is organized)	3(FEI number, if epph	able)
Upon Filing			
·	(Date first transacted business in Florida, if prior to ( (See sections 603.0904 & 605.0903, F.S. to determine)	ensuration.) le penalty (jability)	
2 Coyote Court		6. P.O. Box 181	
(Strikt Address of	Principal Other)		<u> </u>
Brewster, NY 10509		Somers, NY 10589	
	·		A
. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)	E
Name:	Katina Tsucalas Shea		
	6 Lucerne Avenue, Unit 3		<b>p</b> i
Office Address:	o Edecide Vereine, Guir D		·
011100 / (041033.			
011100,(04103).	Lake Worth	, Florida <u>33460</u>	
	(City)	, Florida <u>33460</u> (Zip code)	
legistored agent's accep laving been named as re	(City) otance: egistered agent and to accept service of p	rocess for the above stated timuted dabilic	
legistored agent's accep laving been named as re esignated in this applica	(City) otance: egistered agent and to accept service of p ation, I hereby accept the appointment as	rocess for the above stated limited upplic registered agent and agree to act in this	ç company a n capacity. I furi
legistered agent's accep laving been named as re esignated in this applica o comply with the provis	(City) otance: egistered agent and to accept service of p ation. I hereby accept the appointment as lons of all statutes relative to the proper	rocess for the above stated timuted dabilic	ç company a n capacity. I furi
legistered agent's accep laving been named as re esignated in this applica o comply with the provis	(City) otance: egistered agent and to accept service of p ation, I hereby accept the appointment as	rocess for the above stated limited traffic registered agent and agree to act in this and complete performance of my duties, t	ç company a n capacity. 1 furi
legistered agent's accep laving been named as re esignated in this applica o comply with the provis	(City) ottance: egistered agent and to accept service of p ation, I hereby accept the appointment a lons of all statutes relative to the proper is of my position as registered agent.	rocess for the above stated limited upblic registered agent and agree to act in this and complete performance of my duties, i Katina Shea	ç company a n capacity. 1 furi
legistered agent's accept laving been named as re esignated in this applica to comply with the provis and accept the obligation	(City) ottance: egistered agent and to accept service of p ation, I hereby accept the appointment a lons of all statutes relative to the proper is of my position as registered agent. (Regimeted agent's s	rocess for the above stated limited traditions registered agent and agree to act in this and complete performance of my duties, the Katina Shea	ç company a n capacity. 1 furi
legistered agent's accept laving been named as re- esignated in this applica to comply with the provis and accept the obligation b. The name, title or capt	(City) egistered agent and to accept service of p taion, I hereby accept the appointment ac lons of all statutes relative to the proper is of my position as registered agent. (Registered agent's s acity and address of the person(s) who ha	spectral sciences for the above stated limited tradition registered agent and agree to act in this and complete performance of my duties, the <u>science Skea</u> (generat) schave authority to manage is/are:	company a li capacity. I furi and I am famili
Registered agent's accept laving been named as re- esignated in this application o comply with the provision accept the obligation B. The name, title or capt Title or Capacity:	(City) trance: egistered agent and to accept service of p trion, I hereby accept the appointment ac- lons of all statutes relative to the proper ts of my position as registered agent. (Registered agent's second (Registered agent's second (Registe	spectral sciences for the above stated limited tradition registered agent and agree to act in this and complete performance of my duties, the <u>science Skea</u> (generat) schave authority to manage is/are:	ç company a n capacity. 1 furi
legistered agent's accept laving been named as re- esignated in this applica to comply with the provis and accept the obligation b. The name, title or capt	(City) trance: egistered agent and to accept service of p trion, I hereby accept the appointment ac- lons of all statutes relative to the proper ts of my position as registered agent. (Regiment agent's second (Regiment	spectral sciences for the above stated limited tradition registered agent and agree to act in this and complete performance of my duties, the <u>science Skea</u> (generat) schave authority to manage is/are:	company a li capacity. I furi and I am famili
Registered agent's accept laving been named as re- esignated in this application o comply with the provision accept the obligation B. The name, title or capt Title or Capacity:	(City) trance: egistered agent and to accept service of p trion, I hereby accept the appointment ac- lons of all statutes relative to the proper ts of my position as registered agent. (Registered agent's second (Registered agent's second (Registe	spectral sciences for the above stated limited tradition registered agent and agree to act in this and complete performance of my duties, the <u>science Skea</u> (generat) schave authority to manage is/are:	company a li capacity. I furi and I am famili
Registered agent's accept laving been named as re- esignated in this application o comply with the provision accept the obligation B. The name, title or capt Title or Capacity:	(City) trance: egistered agent and to accept service of p trion, I hereby accept the appointment ac- lons of all statutes relative to the proper ts of my position as registered agent. (Regiment agent's se acity and address of the person(s) who ha <u>Name and Address:</u> Katina Tsucalas Shea <u>2 Coyote Court</u>	spectral sciences for the above stated limited tradition registered agent and agree to act in this and complete performance of my duties, the <u>science Skea</u> (generat) schave authority to manage is/are:	company a li capacity. I furi and I am famili
Registered agent's accept laving been named as re- esignated in this application o comply with the provision accept the obligation B. The name, title or capt Title or Capacity:	(City) trance: egistered agent and to accept service of p trion, I hereby accept the appointment ac- lons of all statutes relative to the proper ts of my position as registered agent. (Regiment agent's se acity and address of the person(s) who ha <u>Name and Address:</u> Katina Tsucalas Shea <u>2 Coyote Court</u>	spectral sciences for the above stated limited tradition registered agent and agree to act in this and complete performance of my duties, the <u>science Skea</u> (generat) schave authority to manage is/are:	company a li capacity. I furi and I am famili

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 do submitted

	xecuted in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information
n a documei	nt to the Department of State constitutes a third degree fojony as provided for in s.817.155, F.S.
	Katina Shea
	Signature of an authonized perion
	Katina Tsucalas Shea
	Typed or printed name of signet

÷

GERALD WEINGERG 14170003147143 No. 3661 P. 3

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

I hereby certify, that TETK MANAGEMENT LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/06/2000, and that the 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 29th day of November two thousand and seventeen.

Brendan W. Fitzgerald Executive Deputy Secretary of State

<u>;</u>;;

201711300579 + 13