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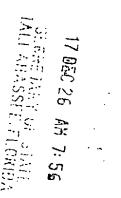
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COVER LETTER

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TO:		ion Section of Corporation:	s				
SUBJE		inx Properties L					
SUBJE	···			Limited Liability (Company		
						ansact Business in Florida," Cer y company to transact business	
Please n	eturn all co	orrespondence co	oncerning this matter to the	following:			
		Iohn Minio					
	-		N	ame of Person			
		Phalanx Properti	ies LLC				
	-		F	irm/Company			
		PO Box 7911					
	-			Address			
		New York, NY	10150				
	-		City/S	tate and Zip Code			
	cj	minio@gmail.co	om				
			E-mail address: (to be use	d for future annual	report not	lification)	
For furt	her informa	ation concerning	this matter, please call:				
	John Min	io		908 at (230-282	22	
		Name of	Contact Person	Area Code	Day	rtime Telephone Number	
	Division of Registrati P.O. Box	G ADDRESS: of Corporations on Section 6327 ee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section fullding secutive Center Circle see, FL 32301	
Enclose		k for the followi 0 Filing Fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Certified Copy	icate

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 HABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

Delaware [Jurisdiction under the law of whith 12/11/17 1514 Bel Aire Court WellStreet Address of Pr Point Pleasant, NJ 08742	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determine)	3. <u>38-4007850</u> (FI	El number, if applica		
12/11/17 1514 Bel Aire Court We (Street Address of Pa	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	D	El number, if applica		
1514 Bel Aire Court We	(See sections 605,0904 & 605 0905; F.S. to determ			able)	_
1514 Bel Aire Court We	(See sections 605,0904 & 605 0905; F.S. to determ				
(Street Address of Pri		> registration)	 		
(Street Address of Pri		6 PO Box 7911			
Point Pleasant, NJ 0874:		0.	ng Address)		_
	2	New York, NY 10150)		
				<u> </u>	
Name and street address	of Florida registered agent: (P.O. Box	'		7 0EC 2	
Name:	Giorlando Minio- Authorized Manage	<u>:r</u>		NATION OF	
Office Address:	101 South Highland Street			<u> </u>	
	Mount Dora	m:a. 32755	7	5	
	(City)	, Florida <u>32757</u>	Zin code)	三三	
ignated in this application of the comply with the provision	ance: eistered agent and to accept service of ion, I hereby accept the appointment o ons of all statutes relative to the proper of my position as registered agent;	as registered agent and agree t	o act in this c	apacity. I fu	rther a
signated in this applicati comply with the provision d accept the obligations	ristered agent and to accept service of ion, I hereby accept the appointment ons of all statutes relative to the proper of my position as registered agent's IRegistered agent's	us registered agent and agree t ir and complete performance of ssignature)	o act in this c f my duties, a	apacity. I fu	rther a
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signated in this application comply with the provision of accept the obligations. The name, title or capac	pistered agent and to accept service of ion, I hereby accept the appointment of ons of all statutes relative to the proper of my position as registered agent. City and address of the person(s) who hame and Address: Christopher Minio	us registered agent and agree to and complete performance of signature) as/have authority to manage is/	o act in this c f my duties, a fare:	apacity. I fu. nd I am fami	rther a liar wi
rsignated in this application comply with the provision and accept the obligations. The name, title or capacity:	cistered agent and to accept service of ion. I hereby accept the appointment of ons of all statutes relative to the proper of my position as registered agent. City and address of the person(s) who hame and Address: Christopher Minio	as registered agent and agree to and complete performance of signature) as/have authority to manage is/ Title or Capacity:	are: John	apacity. I fund I am famile and Address Minio	rther a liar wi s:
signated in this application comply with the provision of accept the obligations. The name, title or capacity:	cistered agent and to accept service of ion. I hereby accept the appointment of one of all statutes relative to the proper of my position as registered agent. City and address of the person(s) who have and Address: Christopher Minio C/o Phalanx Proper +ies L P.O. Box 791/	as registered agent and agree to and complete performance of scienature) as/have authority to manage is/ Title or Capacity: Managing Member	are: John	apacity. I fund I am famile and Address Minio	s:
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signated in this application comply with the provision of accept the obligations. The name, title or capacity:	cistered agent and to accept service of ion. I hereby accept the appointment of one of all statutes relative to the proper of my position as registered agent. City and address of the person(s) who hame and Address: Christopher Minio C/o Phalay Properties L P.O. Box 7911 NEW YOUR NY 1015	as registered agent and agree to and complete performance of scienature) as/have authority to manage is/ Title or Capacity: Managing Member	are: John	apacity. I fund I am famile and Address Minio	s:

Typed or printed name of signee



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PHALANX PROPERTIES 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 FIFTH DAY OF DECEMBER, A.D. 2017.



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Authentication: 203684110

Date: 12-05-17