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January 16, 2018

RICHARD BOLKO 1825 NW CORPORATE BLVD STE 110 BOCA RATON, FL 33431 US

SUBJECT: DAVIES & ASSOCIATES LLC

Ref. Number: W18000003953

We have received your document for DAVIES & ASSOCIATES LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

- The form you submitted is for a Foreign Corporation, but your entity is a Foreign Limited Liability Company. Please complete and return the enclosed blank form(s).
- The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

Please list the complete principal office address.

Please return the corrected original and one copy of your document, along with 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.

Brittany M Figueroa Regulatory Specialist II Registration/Qualification Section

www.sunbiz.org

Letter Number: 418A00000882

COVER LETTER

TO:						
	Division of Con					
		& ASSOCIATES, LLC				
SUBJ	ECT:			. 1 1 65		
		Name of co	orporation -	must include suffix		
Dear S	Sir or Madam:					
"Certi	ficate of Existence		Good Stand	ling" and check are sub	ct Business in Florida," omitted to register the	
	return all corresp ARD BOLKO	ondence concerning t	this matter	to the following:		
			Name of P	erson		
BOLK	O & ASSOCIATES	, LLC				
			Firm/Comp	anv		
1825 N	NW CORPORATE		-			
-			Addres			
BOCA	RATON, FL 3343	I	710010			
_		C	ity/State an	d Zip code		
RICH	ARD@BOLKOCPA	COM				
		E-mail address: (to	be used fo	or future annual report	notification)	
For fu	rther information	concerning this matte	r, please ca	dl:		
RICHARD BOLKO			561	707-6496		
				.)	· · · · · · · · · · · · · · · · · · ·	
	Name of Persor	1	Area Code	Daytime Telep	hone Number	
	CTDEET/COU	DIED ABBRECC.		MATE INC. A	DDDESS.	
STREET/COURIER ADDRESS: Registration Section				MAILING ADDRESS: Registration Section		
Division of Corporations				Division of Corporations		
Clifton Building				P.O. Box 6327		
2661 Executive Center Circle				Tallahassee, FL 32314		
	Tallahassee, FL	32301				
Enclo	sed is a check for	the following amount	:			
S \$7	0.00 Filing Fee	□ \$78.75 Filing Fe Certificate of St		\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee. Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.0902, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A POREION LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. 1. DAVIES & ASSOCIATES LLC (Name of Persign Limited Limbbly Company; used include "Limbbly Company," "LLC., or "LLC.") DAVIES & ASSOCIATES FL LLC (If name unswitting, gater electate name adopted for the purpose of transporing training to Pixtin. The alternate same must include "Lincing Linklity Company," "L.L.C," or "LLC.") 2 NEW YORK (His section, if sections) Contribution under the law of which farmer bushed habitaty company is one materials in Plottice, if prior to registration. 6 80 SW 8TH ST, SUITE 2000 80 SW 8TH ST, SUITE 2000 Climat Address of Principal Collec-MIAMI, FL 33130 MIAML FL 33130 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) BOLKO & ASSOCIATES, LLC Name: 1825 NW CORPORATE BLVD, SUITE 110 Office Address: Florida 33431 **BOCA RATON** 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 designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. Thereby 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. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Canacity: Name and Address: Title or Capacity: Name and Address: MARK IVAN DAVIES MGR 400 ESTTH STREET, 9N NEW YORK, NY 10022 (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 animitted in a document to the Department of State constitutes a third degree follow as provided for in #817.155, F.S.

Typed or printed sense of signer

MARK IVAN DAVIBS

State of New York Department of State } ss:

I hereby certify, that DAVIES & ASSOCIATES LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 02/10/2012, and that the Limited Liability Company is existing so far as shown by the records of the Department.

The Biennial Statement is past due.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 22nd day of December two thousand and seventeen.

Brendan W. Fitzgerald Executive Deputy Secretary of State