

H18000001340

Florida Department of State
Division of Corporations
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To: Division of Corporations
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Foreign Limited Liability Company
SHADY HAMMOC, LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHADY HAMMOC, 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:

Allstate Corporate Services Corp.
Name of Person

2215 HENDRICKSON STREET, SUITE 1
Firm/Company

Address

Brooklyn, NY 11234
City/State and Zip Code

filing@acs123.com
E-mail address: (to be used for future annual report notification)

110

For further information concerning this matter, please call:

Naomi Ostopowitz at (800) 906-9220
Name of Contact Person 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

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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. SHADY HAMMOC, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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 YORK 3. N/A (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized)

4. UPON REGISTRATION (Date first transacted business in Florida, if prior to registration. (See sections 605.0904 & 605.0905, F.S. to determine penalty liability))

5. 18 GALENTE LANE, MILLBROOK, NEW YORK 12545 (Street Address of Principal Office)

6. 14 SHADY LANE NORTH, PALM COAST, FL 32127 (Mailing Address)

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

8. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

[Handwritten Signature] Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Steven Weiss, Authorized Person Typed or printed name of signee

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ADDITIONAL MEMBER INFORMATION

WILLIAM CHAMBERLERA, 50 McCOURT RD, DOVER PLAINS NY 12522

RONALD GALENTE, 18 GALENTE LANE, MILLBROOK, NEW YORK 12545

RICHARD GALENTE, 50 McCOURT RD, DOVER PLAINS NEW YORK 12522

WILLIAM GALENTE, 44 McCOURT RD, DOVER PLAINS NEW YORK 12522

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

SHADY HAMMOC, LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Registered Agent Solutions, Inc.

(Name)

155 Office Plaza Dr. Suite A

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Tallahassee

FL

32301

City/State/Zip

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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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.



Steven Weiss, Assistant Secretary

- \$ 100.00 Filing Fee for Application
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (optional)
- \$ 5.00 Certificate of Status (optional)

H180000452303

State of New York } ss:
Department of State

I hereby certify, that SHADY HAMMOC, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 02/06/2018 with an effective date of 02/06/2018, and that the Limited Liability Company is existing so far as shown by the records of the Department.



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TALLAHASSEE, FLORIDA

...
WITNESS my hand and the official seal of the Department of State, at the City of Albany, this 6th day of February two thousand and eighteen, at 10:37 AM.

Brendan W. Fitzgerald
Executive Deputy Secretary of State

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