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Florida Department of State
Division of Corporations
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Foreign Limited Liability Company
HASV, LLC

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COVER LETTER

H180000 748283

TO: Registration Section
Division of Corporations

SUBJECT: HASV, 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:

GREGORY R. COHEN, ESQ.

Name of Person

COHEN NORRIS ET AL.

Firm/Company

712 U.S. HIGHWAY ONE, SUITE 400

Address

NORTH PALM BEACH, FL 33408

City/State and Zip Code

GRC@FCOHENLAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GREGORY R. COHEN

561

844-3600

at ()

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 FLORIDAIN 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. HASV, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

2. NEW YORK 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)4. None
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)5. 228 Grand Point Drive
(Street Address of Principal Office)
Palm Beach Gardens, FL 334186. 228 Grand Point Drive
(Mailing Address)
Palm Beach Gardens, FL 334187. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)Name: Harvey SorkinOffice Address: 228 Grand Point Drive
Palm Beach, Florida 33418
(City) (Zip code)

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 place
designated in this application, 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 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.

(Registered agent's signature)

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

Title or Capacity: Name and Address: Title or Capacity: Name and Address:Manager Harvey Sorkin
228 Grand Point Drive
Palm Bch Gardens, FL 33418

(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
submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of an authorized person

Harvey Sorkin

Typed or printed name of signer

H180000748283

**State of New York
Department of State } ss: _____**

I hereby certify, that HASV LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/26/2002, and that the Limited Liability Company is existing so far as shown by the records of the Department. I further certify the following:

An Affidavit of Publication of HASV LLC was filed on 10/25/2002.

An Affidavit of Publication of HASV LLC was filed on 10/23/2002.

A Biennial Statement was filed 07/01/2004.

A Biennial Statement was filed 02/06/2007.

A Biennial Statement was filed 09/06/2012.

A Biennial Statement was filed 11/20/2014.

A Biennial Statement was filed 07/05/2016.

I further certify, that no other documents have been filed by such Limited Liability Company.

FILED
18 MAR -7 AM 11:54
SECRETARY OF STATE
MAIL ROOM



Witness my hand and the official seal
of the Department of State at the City
of Albany, this 05th day of March
two thousand and eighteen.

Brendan W. Fitzgerald
Executive Deputy Secretary of State