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**4/26/2018** 

115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: I20000000088

Date:	
Name: Merritt Knickle	
Reference #: <b>D317030</b>	
Entity Name: 3220 NW 2ND AVENUE, LLC	
✓ Articles of Incorporation/Authorization to Transact Business	
☐ Amendment	
Change of Agent	
Reinstatement	
Conversion	
☐ Merger	
☐ Dissolution/Withdrawal	
☐ Fictitous Name	
Other	
Authorized Amount: \$125 Signature: , ,,,,/,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

@CORPORATE HQ

COGENCY GLOBAL INC. 10 E 40<sup>T-1</sup> ST, 10<sup>T+1</sup> FL NY, NY 10016 800.221.0102 +1.212.947.7200 @EUROPEAN HQ

COGENCY GLOBAL (UK) LIMITED REGISTERED IN ENGLAND & WALFS, REGISTRY 4801072 6 BEVIS MARKS, 19<sup>1</sup> FL LONDON EC3A 7BA +44 (0)20.3786.1090 ASIA PACIFIC HQ

COGENCY GLOBAL (HK) LIMITED A HONG KONG LIMITED COMPANY INFINITUS PLAZA, 12<sup>IN</sup> FL 199 DES VOEUX RD CENTRAL HONG KONG +852.3975.1803



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

## 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: 3220 NW 2nd Avenue, LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.") (If more unwellable, order alternate name adopted for the purpose of transacting business in Florids. The alternate name must include "Limited Liability Company," "L.L.C," or "LUC.") Delaware (Jurisdiction under the law of which through familed liability company is organize (FEI number, if applicable) 25 Dakota Street 25 Dakota Street (Street Address of Principal Office) (Mailing Address) Passalc, New Jersey 07055 Passalc, New Jersey 07055 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) COGENCY GLOBAL INC. Name: 115 North Calhour Street, Suite 4 Office Address: Tallahassee Florida (City) 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. 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: Sole Member TSP Wynwood, LLC 25 Cabata Street Passate, New Jensey 07054 (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 constitutors a third degree felony as provided for in a.817.155, F.S. Thomas Stainberg

Typed or printed tume of signer

Page 1

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "3220 NW 2ND AVENUE, 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 TWENTY-FOURTH DAY OF APRIL, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "3220 NW 2ND AVENUE, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF APRIL, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 202567423

Date: 04-24-18

6855095 8300 SR# 20182954923