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Electronic Filing Menu

Corporate Filing Menu

Help

#### **COVER LETTER**

TO:	Registration Section Division of Corporations				
CHI CHI S	cr. Shop601 LLC				
SUBJE	Name	of Limited Liabili	ty Company		
The enc	losed "Application by Foreign Limited Liabil ee, and check are submitted to register the abo	ity Company for	Authorization	on to Trans i liability c	not Business in Florida," Certificate of ompany to transact business in Plorida
Please r	eturn all correspondence concerning this mar	er to the following	hġ:	A. Carlo	
	Allstate Corpora			orp.	
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	filing@acs123.c	om			
	E-mail address:	(to be used for fut	ure annual rep	ort notificat	ion)
For fur	ther information concerning this matter, pleas	e call:			
	Naomi Ostopowitz		800	906	-9220 Lime Telephone Number
	Name of Contact Person	এপ4ই	Area Test	Dayı	lime Telephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET AD Division of Co Registration S Clifton Buildi 2661 Executiv Tallahassoc, F	orporations ection - ng ve Center Cir	ole	
Enclo	osed is a check for the following amou S125.00 Filing Fee S130.00 Filing Certificate of	g Fee & 🖵 🎖	155.00 Filing Certified Cop		☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

## 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:

Shop601 LLC			
(Name of Foreig	n Limited Liability Company; must	include "Limited Liability Company,"	L.L.C.," or "LLC.")
If name unavailable, enter alte	rnate name adopted for the purpose or "LLC.")	e of transacting business in Piorida. Th	e alternate name must include "Limited
NEW YORK		3. N/A	
(Jurisdiction under the law o	of which foreign limited liability	(FEI num	ber, if applicable)
UPON REGI			
•	(Date first transpoted busine (See sections 605,0904 & 605.	ess in Florida, if prior to registration.) 0905, F.S. to determine penalty liabili	ry)
520 WEST 27		601, NE\"! YORK, N	
•			
<del></del>	(Street Ac	ddress of Principal Office)	
520 WEST 27	TH STREET, UNIT	601, NEW YORK, N	EW YORK, 10001
<del></del>		(Mailing Address)	
7. The name title of	canacity and address of the	person(s) who has/have auth	nority to manage is/are:
		Avenue, Apt 902 Ne	
	<del></del>		
Michele Levy, N	Member, 305 2nd A	Avenue, Ant 902 Ne	W YORK, NY 10003
Lauring anatody of teor	ards in the jurisdiction unde	er the law of which it is orgai	uly authenticated by the official nized. (A photocopy is not icate under oath of the translator
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er literation COS	AAAA C.C. sha assaulian of this docume	of an authorized person	nalties of porjury that the facts stated herein are tre
om aware that any false informat	ion submitted in a document to the Dep	partment of State constitutes a third degree	tetatiy es provided to: maid title to the
	Steven Weiss, Authorized P		2078
	Typed or p	rinted name of signee	RAY 17
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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Marie 42 4

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.

If unavailable, t	he alternate to be used in	the state of Florida is:			
2. The name ar	nd the Florida street addre	ess of the registered agent and office are:			
	Registered Ag	gent Solutions, Inc.			
		(Namc)	- 图()	2318	
	155 Office Pla	aza Dr, Suite A		HAY	-
	Florida Street Address (P.O. Box NOT ACCEPTABLE)			7 1.7	TO MA
	Tallahassee		iniz m	44	1
		City/State/Zip		3: £6	77 631

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

S 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

### State of New York Department of State

I hereby certify, that SHOP601 LLC a NEW!YORE! Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 05/23/2011, and that the Limited Liability Company is existing so far as shown by the records of the Department.

**} ss:** 

The Biennial Statement is past due.

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



Witness my hand and the official scal of the Department of State at the City of Albany, this 16th day of May two thousand and eighteen.

are -

Brendan W. Fitzgerald
Executive Deputy Secretary of State

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