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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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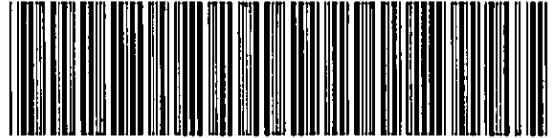
(Business Entity Name)

(Document Number)

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BRYANS & GRAMUGLIA
CPAs, LLC

May 15, 2018

Florida Department of State
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir/Madam;

Attached is the application for Bryans & Gramuglia CPAs, LLC to register, with the Florida Department of State, as a foreign limited liability company. Also, included is a check in the amount of \$125.00 for the application filing fee and designation of registered agent fee.

Sincerely,

A handwritten signature in black ink, appearing to read "R. Gramuglia".

Robert V. Gramuglia, CPA
Partner

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Bryans & Gramuglia CPA's, 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:

Robert Gramuglia

Name of Person

Bryans & Gramuglia CPA's, LLC

Firm/Company

1 Pine West Plaza, Suite 107

Address

Albany, New York 12205

City/State and Zip Code

rgramuglia@bgcpa.net

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

For further information concerning this matter, please call:

Robert Gramuglia

518

452 - 8055 Ext. 13

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

**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. Bryans & Gramuglia CPA's, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
Bryans and Gramuglia CPA's, 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. 20-2954888
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. _____
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 1 Pine West Plaza, Suite 107 6. 1 Pine West Plaza, Suite 107
(Street Address of Principal Office) (Mailing Address)
Albany, New York 12205 Albany, New York 12205

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Robert Gramuglia
Office Address: 3115 Gulf Shore Boulevard North, #411 South
Naples, Florida 34103
(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)

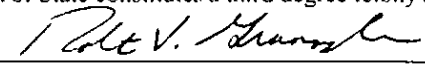
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

| <u>Title or Capacity:</u> | <u>Name and Address:</u> | <u>Title or Capacity:</u> | <u>Name and Address:</u> |
|---------------------------|---|---------------------------|--|
| <u>CPA</u> | <u>Robert Gramuglia</u> <u>1 Pine West Plaza, Suite 107</u> <u>Albany, New York 12205</u> | <u>CPA</u> | <u>John Bryans</u> <u>1 Pine West Plaza, Suite 107</u> <u>Albany, New York 12205</u> |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

(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

Robert V. Gramuglia
Typed or printed name of signer

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
18 MAY 21 PM 3:07

State of New York
Department of State } ss:

I hereby certify, that BRYANS & GRAMUGLIA CPA'S, LLC a NEW YORK Professional Service Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 06/03/2005, and that Professional Service 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 BRYANS & GRAMUGLIA CPA'S, LLC was filed on 11/22/2005.

An Affidavit of Publication of BRYANS & GRAMUGLIA CPA'S, LLC was filed on 11/22/2005.

A Biennial Statement was filed 07/03/2007.

A Biennial Statement was filed 06/16/2009.

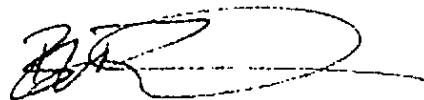
A Biennial Statement was filed 06/17/2011.

A Biennial Statement was filed 06/06/2013.

A Biennial Statement was filed 04/30/2018.

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

WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 04th day of May two
thousand and eighteen.



Brendan W. Fitzgerald
Executive Deputy Secretary of State