

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
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Foreign Limited Liability Company  
FULL NEW HOUSE LLC

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JUL-2 2018

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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. FULL NEW HOUSE 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

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 20-3137414

(FEI number, if applicable)

4. Upon filing

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

5. 25903 62nd Ave

(Street Address of Principal Office)

Little Neck, NY 11362

6. 25903 62nd Ave

(Mailing Address)

Little Neck, NY 11362

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

Name: Kuang W. Nie

Office Address: 4794 Maid Marian Lane

Sarasota

(City)

, Florida 34232

(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.

Kuang Nie

(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:

Member

Ping Zhu

25903 62nd Ave

Little Neck, NY 11362

(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.

Ping Zhu  
Signature of an authorized person

Ping Zhu, Member

Typed or printed name of signer

FILED  
18 JUN 29 AM 8:44  
STATE OF FLORIDA  
DEPARTMENT OF STATE

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

*I hereby certify, that FULL NEW HOUSE LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/08/2005, and that the Limited Liability Company is existing so far as shown by the records of the Department. I further certify the following:*

*A Biennial Statement was filed 07/18/2007.*

*A Certificate of Publication of FULL NEW HOUSE LLC was filed on 01/08/2018.*

*A Biennial Statement was filed 06/21/2018.*

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



\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 27th day of June  
two thousand and eighteen.*

Brendan W. Fitzgerald  
Executive Deputy Secretary of State

SECRETARY OF STATE  
TAMARA L. FLAHERTY

18 JUN 29 AM 8 44

FILED