

M18000007897

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H180002512123))



H180002512123ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
 Fax Number : (850)617-6383

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC
 Account Number : 110432003053
 Phone : (561)694-8107
 Fax Number : (561)694-1639

2018 AUG 27 AM 8:47
 FILED
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

Foreign Limited Liability Company 517 DECATUR REALTY LLC

| | |
|-----------------------|----------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$130.00 |

2018 AUG 27 PM 4:58

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 517 Decatur Realty 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:

Nick Dragonetti
Name of Person

Firm/Company

129 Louisiana Avenue
Address

Brooklyn, NY 11207
City/State and Zip Code

shalini@dragonettibrothers.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nick Dragonetti at (718) 451-1300
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. S.17 Decatur Realty LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "L.L.C.")

(If the state, territory, or other jurisdiction where adopted for the purpose of transacting business in Florida. The alternate name may include "Limited Liability Company," "LLC" or "L.L.C.")

2. New York 3. 83-1292568
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI Number, if applicable)

4. _____
(If the best operational address in Florida. Report to registration. (See sections 605.0904 & 605.0905, F.S. to determine penalty liability.)

5. 129 Louisiana Avenue 6. 129 Louisiana Avenue
(Street Address of Principal Office) (Mailing Address)
Brooklyn, NY 11207 Brooklyn, NY 11207

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

Name: Nick Dragoretti
Office Address: 600 South Dixie Highway Unit 213
West Palm Beach, Florida 33401
(City and State)

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.

[Signature]
(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: |
|--------------------|---|--------------------|-------------------|
| <u>Members</u> | <u>129 Louisiana Avenue</u> <u>Brooklyn NY 11207</u> <u>Nick Dragoretti</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 to a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

[Signature]
Signature of an authorized person
Nick Dragoretti
Typed (printed) name of signor

2018 AUG 27 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

I hereby certify, that 517 DECATUR REALTY LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/13/2018, and that the Limited Liability Company is existing so far as shown by the records of the Department.

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 24th day of August
two thousand and eighteen.*



Brendan W. Fitzgerald
Executive Deputy Secretary of State



261908270011 * 08