

M18000009290

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

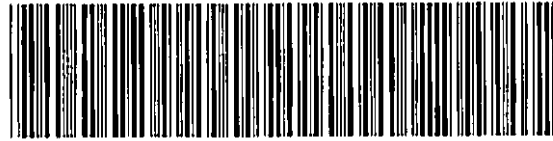
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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18 OCT 15 AM 11:13

FILED  
SECRETARY OF STATE  
18 OCT 15 PM 12:10

N. CAUSSEAU

OCT 17 2018

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 430210 4302440  
AUTHORIZATION :   
COST LIMIT : \$ 105.00

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ORDER DATE : October 9, 2018  
ORDER TIME : 9:22 AM  
ORDER NO. : 430210-005  
CUSTOMER NO: 4302440

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FOREIGN FILINGS

NAME: M&N 117 LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: \_\_\_\_\_

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: M&N 117 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:

Eileen Logan

\_\_\_\_\_  
Name of Person

Atkins & Breskin, L.L.C.

\_\_\_\_\_  
Firm/Company

133 Norfolk Street

\_\_\_\_\_  
Address

New York, New York 10002

\_\_\_\_\_  
City/State and Zip Code

elogan@atkbrc.com

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

For further information concerning this matter, please call:

Kim Renny

212

984-7733

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. M&N 117 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. \_\_\_\_\_  
(FEI number, if applicable)
4. October 12, 2018  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0704 & 605.0905, F.S. to determine penalty liability)
5. c/o Atkins & Breskin, L.L.C.  
(Street Address of Principal Office)  
133 Norfolk Street  
New York, New York 10002
6. c/o Atkins & Breskin, L.L.C.  
(Mailing Address)  
133 Norfolk Street  
New York, New York 10002

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OCT 15 PM 12:10

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

Name: Corporation Service Company

Office Address: 1201 Hays Street  
Tallahassee, Florida 32301  
(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.

Roxanne Turner  
(Registered agent's signature)

Roxanne Turner  
Asst. Vice President

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:
MGR	<u>Jerry Atkins</u> <u>133 Norfolk St</u> <u>NY, NY 10002</u>	MGR	<u>Stephen Breskin</u> <u>133 Norfolk St</u> <u>NY, NY 10002</u>
MGR	<u>Benjamin Atkins</u> <u>45 Main St #502</u> <u>Bklyn, NY 11201</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.

Eileen Logan  
Signature of an authorized person

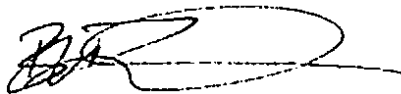
Eileen Logan  
Typed or printed name of signee

# State of New York Department of State } ss:

I hereby certify, that M&N 117 LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 05/04/2016, and that the Limited Liability Company is existing so far as shown by the records of the Department.

\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 10th day of October  
two thousand and eighteen.*



Brendan W. Fitzgerald  
Executive Deputy Secretary of State



201810110220 • 45

FILED  
CLERK OF THE COURT  
JAN 15 2019  
9:12 OCT 15 PM 12:10