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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER TO: Registration Section **Division of Corporations** SUBJECT: lame 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: For further information concerning this matter, please call: STREET ADDRESS: **MAILING ADDRESS:** Division of Corporations Division of Corporations Registration Section Registration Section P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

□ \$155.00 Filing Fee &

Certified Copy

□ \$160.00 Filing Fee, Certificate

of Status & Certified Copy

Enclosed is a check for the following amount: \$\frac{1}{125.00}\$ Filing Fee \$\Boxed\$ \$130.00

□ \$130.00 Filing Fee &

Certificate of Status

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

COMPANYTOTRANSACT BU	ISINESS IN THE STATE OF FLORIDA: Realty LLC	IE FOILOWING IS SUBMITTED TO REGIST.	
(Name of Foreign	Limited Liability Company; must include "Li	imited Liability Company," "L.L.C.," or "LI.C.")	
2Neu	ame adopted for the purpose of transacting business in th	in Florida. The alternate name must include "Limited Lial 3. 20 - 068 (FEI number)	oility Company," "L.I., C," or "I.I.C.")  \$\frac{290}{\text{output}}\$  wer, if applicable)
4	(Date first transacted business in Florida, if pri (See sections 605.0904 & 605.0905, F.S. to de	i    - 	
5. 2528 RG (Street Address of F	note 17 m	6. Po Box P  (Mailing Add)	59 NY 10924
7. Name and street address	ss of Florida registered agent: (P.O. i		318 S. T. 18 OCT
Name:	103400 Overse	harefeet Vacation (Lentals as Hwy # 203	21
designated in this applicate comply with the provise and accept the obligation.  8. The name, title or capa	tance:  registered agent and to accept service tion, I hereby accept the appointment of all standard relative to the property of the person (s) where (s) where the person (s) where (s) wh	Florida 330 (Zip cod  of process for the above stated limited int as registered agent and agree to act oper and complete performance of my  tent's signature) to has/have authority to manage is/are:	liability company at the place in this capacity. I further agree duties, and I am familiar with
Title or Capacity:	Name and Address: Paul Healey Coshen NY	Title or Capacity:	Name and Address:
member	Debra Healey & Heasant Ridge Goshen Dy I	2 (Cu)	
(Use attachments if neces	sary)	1	
	of which it is organized. (If the certif	old, duly authenticated by the official ha	
	the Department of State constitutes	0203 (1) (b), Florida Statutes. I am awar a third degree felony as provided for in	
	Paul H	teale of an analogized person	

## State of New York Department of State

ss:

I hereby certify, that DLH REALTY LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 01/21/2004, and that the Limited Liability Company is existing so far as shown by the records of the Department.



外外升

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 28th day of September two thousand and eighteen.

Brendan W. Fitzgerald Executive Deputy Secretary of State