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COVER LETTER

TO:

Registration Section

Division of Corporation	ıs	•		
	<i>\$</i> 0 <	Sidssex 1	1) C	
SUBJECT:		Limited Liability C		
	Name of i	Limited Liability C	Ompany	
The enclosed "Application by For Existence, and check are submitte	eign Limited Liability Comp d to register the above refero	pany for Authorizat enced foreign limite	ion to Tran ed liability	nsact Business in Florida," Certificate of company to transact business in Florida.
Please return all correspondence c	oncerning this matter to the	following:		
	Λ	1:n Huana		
	N:	ame of Person		
	Wuune Su	155 EX. LL	·C.,	
	.J Fi	rm/Company		
<i>a</i> c	2 Tollgate Driv	<u>ıe</u>	<u></u>	
	J	Address		
<u>Eas</u>	+ Northport; 1 City/S	Vew York tate and Zip Code	1173	31
MinHua	ng Li e gmail. (E-mail address: (to be used	om d for future annual	report noti	fication)
For further information concerning	g this matter, please call:			
Min Ho Name o	AANS f Contact Person	at (201 Area Code) <u>64</u> Days	7 - 9708 time Telephone Number
MAILING ADDRESS: Division of Corporations				ADDRESS: of Corporations
Registration Section				on Section
P.O. Box 6327			Clifton Bu	
Tallahassee, FL 32314				cutive Center Circle ee, FL 32301
Enclosed is a check for the follow		El else oo pur	F.a. <i>0</i> .	\$160.00 Filing Fee, Certificate
☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Certified Copy	g ree oc	of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 29, 2018

MIN HUANG 22 TULLGATE DRIVE EAST NORTHPORT, NY 11731

SUBJECT: 80 SUSSEX, LLC. Ref. Number: W18000103611

We have received your document for 80 SUSSEX, LLC. and your check(s) totaling \$160.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist II

Letter Number: 718A00024423

See.

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

IN COMPANY TO TRANSACT BUSINESS.		E POLLOWING IS SUBMITTED TO REGI	STEK A POKEIGIN TAMITED IJABILITI
80 SW	ssex, LLC.	nited Liability Company," "L.L.C.," or "LLC	
80 Sussen &	2710 North Monroe	LLC. Florida. The alternate name must include "Limited I	
2. New 3e (lurisduction under the law of which foreign	I limited lightlifty company is organized)	3. 611-806-	- 18 (
	1.1		anner, ii appreasser
4	the first transacted business in Florida, if prior	2018	
1566	sections 605.0904 & 605.0905, F.S. to dete	ernine penalty liability)	
5. 2710 North Mo IStreet Address of Principal Of Talluhnssee,	intoe Stalet	Box NOT acceptable) For Circ STE 100 Florida 3230	n Monsoe Street
Talluhussee.	FL 32303	Tallahasse	e, FL 32303
		· · ·	ALEGE BY
			岩田一
7. Name and street address of Flo	rida registered agent: (P.O. B	Box NOT acceptable)	るること
Name: C/4	ARLES J. REER	1	SE P M
Name.	. 0	2 (100	= 0
Office Address: 282	8 KEMINGTON GREE	Florida 3230	
TAL	LAHASSEE	Florida 3230	08 # 6
	(City)	(Zip c	(xle)
Registered agent's acceptance:		of process for the above stated limite	AR CR
and accept the obligations of my	position as registered agent.	ner and complete performance of m	·
		has/have authority to manage is/are: Title or Capacity:	
			· · · · · · · · · · · · · · · · · · ·
Munaging Mimber	Min Huang	Managing Member	Daniel Li
, ,	- of of 10Hg Wr e - D + 7	:√ e.	_dd_Tollgate_Drive
	East Northfort, 1	NY 11731	EUSP NOTTHING NY 117
(Use attachments if necessary)			
O Association configuration of order			
y. Attached is a certificate of exist jurisdiction under the law of which of the translator must be submitted	it is organized. (If the certific	ld, duly authenticated by the official l cate is in a foreign language, a transl	naving custody of records in the attion of the certificate under oath
10. This document is executed in a	accordance with section 605.0°	203 (1) (b), Florida Statutes. I am awa	are that any false information
submitted in a document to the De	partment of State constitutes a	third degree felony as provided for it	n s.817.155, F.S.
·	2/	(1) cuid C.	
	Signal	ture of an authorized person	
	-		
N	2in Huang I	Daniel Li	
	Туре	d or printed name of signee	

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

80 SUSSEX, LLC 0450108293

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on September 28, 2016.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

REGISTERED AGENTS INC. FIVE GREENTREE CENTRE, STE. 104 525 ROUTE 73 NORTH MARLTON, NJ 08053



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 7th day of December, 2018

Elizabeth Maher Muoio State Treasurer

Sup of Mun

Certificate Number: 6093405879

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp