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COVER LETTER

то:	Registration Section Division of Corporations
SUBJI	LBK Rentals LLC
	Name of Limited Liability Company
The en Exister	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ace, 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:

Robert L. Adams		
Na	nne of Person	
LBK Rentals LLC		
Fi	rm/Company	
258 Hoosick Street,	Suite 201	
	Address	
Troy, NY 12180		
City/Si	tate and Zip Code	<u> </u>
radams@martinshud	dt.com	
E-mail address: (to be used		rt notification)
For further information concerning this matter, please call:		
Robert L. Adams	518 ₂	72-6565 ext 126
Name of Contact Person	Area Code	Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Divi Reg Clift 266	REET ADDRESS: sion of Corporations istration Section ton Building I Executive Center Circle ahassee, 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	e & S160.00 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:

If name unavailable, enter alternate	name adopted for the purpose of transacting business in	Florida. The alternate name must include "Limite	ed Liability Company," "L.L.C," or "LLC,")
New York State	name adopted to the parpose of harmoning country at	1	
(Jurisdiction under the law of v	high foreign limited hability company is organized)	5(FE	number, (l'applicable)
NΛ			
4. <u>NA</u>	(Date first transacted business in Florida, if prior	r to registration.)	
050 Handak Oka	(See sections 605.0904 & 605.0905, F.S. to dete		ot Suite 201
5. 258 Hoosick Stre		6. 258 Hoosick Stre	g Address)
Troy, NY 12180	<u> </u>	Troy, NY 12180	
7. Name and street addre	ess of Florida registered agent: (P.O. B Registered Agents Inc.	ox <u>NOT</u> acceptable)	
Office Address:	3030 N. Rocky Point Dr. ST	ΓΕ 150A	
	Tampa	, Florida 3360	7
Having been named as i designated in this applic to comply with the provi	egistered agent and to accept service (ation, I hereby accept the appointmen sions of all statutes relative to the prop	of process for the above stated lin at as registered agent and agree to	nited liability company at the place o act in this capacity. I further agre
designated in this applic to comply with the provi	ptance: egistered agent and to accept service (ation, I hereby accept the appointmen	of process for the above stated lin at as registered agent and agree to oer and complete performance of	nited liability company at the place o act in this capacity. I further agre
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Having been named as r designated in this applic to comply with the provi and accept the obligation. 8. The name, title or capacity: Manager Officer (Use attachments if necess.)	ptance: registered agent and to accept service of ation. I hereby accept the appointment sions of all statutes relative to the propers of my position as registered agent. Registered agent and address of the person(s) who name and Address: Robert L. Adams 258 Hoosick Street Troy, NY 12180 ressary) The of existence, no more than 90 days of which it is organized. (If the certification of the person of	of process for the above stated line as registered agent and agree to per and complete performance of the signature) o has/have authority to manage is/c Title or Capacity: Officer Officer	are: - Name and Address: - N

Typed or printed name of signee

State of New York } ss:

I hereby certify, that LBK RENTALS LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 10/05/2018, 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 07th day of December two thousand and eighteen.

Whitney Clark

Deputy Secretary of State

Who king Clark