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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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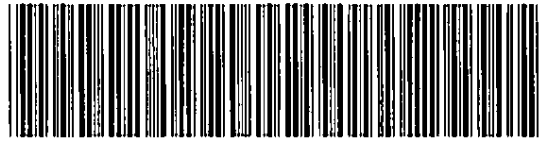
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

DEC 21 2018

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EVEREST ABSTRACT SERVICES, 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:

SHIMON BETESH

Name of Person

EVEREST ABSTRACT SERVICES, LLC

Firm/Company

271 MADISON AVE. SUITE 401

Address

NY, NY 10016

City/State and Zip Code

SHIMON@EVERESTABSTRACT.COM

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

For further information concerning this matter, please call:

SHIMON BETESH

at (212) 684-3030

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 605.012, FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. EVEREST ABSTRACT SERVICES, LLC

(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC")

2. NEW YORK

26-1338896

(Jurisdiction under the law of which foreign limited liability company is organized)

(FEI number, if applicable)

4.

(Use first transacted business in Florida, if prior to registration)
(See sections 601.0904 & 601.0905, F.S. to determine penalty liability)

271 MADISON AVE. SUITE 401

271 MADISON AVE. SUITE 401

5.

(Street Address of Principal Office)

(Mailing Address)

NEW YORK, NY 10016

NEW YORK, NY 10016

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

PECKAR & ABRAMSON A PROFESSIONAL CORPORATION

Peckar & Abramson, P.C.

Name:

One Southeast Third Ave #3100

Office Address:

Miami

33131

, Florida

(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.

X Peckar & Abramson, P.C.

(Registered Agent's signature)

by Stephen H. Reisman

Stephen H. Reisman, Vice Chairman

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

MANAGER

SHIMON BETESH

271 MADISON AVE. SUITE 401

NEW YORK, NY 10016

MANAGER

ILAN BRUHIM

271 MADISON AVE. SUITE 401

NEW YORK, NY 10016

ATTORNEY

MARIN KING

271 MADISON AVE. SUITE 401

NEW YORK, NY 10016

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TALLAHASSEE, FLORIDA

(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.

Signature of an authorized person

Shimon Betesh

Typed or printed name of signer

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

I hereby certify, that EVEREST LAND SERVICES LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 10/31/2007, and that the Limited Liability Company is existing so far as shown by the records of the Department. I further certify the following:

A certificate changing name to EVEREST ABSTRACT SERVICES LLC was filed on 11/29/2007.

A Certificate of Publication of EVEREST ABSTRACT SERVICES LLC was filed on 03/05/2008.

A Biennial Statement was filed 12/05/2012.

A Biennial Statement was filed 11/07/2013.

Certificate of Change was filed on 09/25/2015.

A Biennial Statement was filed 12/05/2018.

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 05th day of December
two thousand and eighteen.*

Whitney Clark
Deputy Secretary of State