M19000001915

(Requestor's Name)						
(Address)						
(Add	dress)					
(City	//State/Zip/Phone	#)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
Cout, name	W19-11	940				

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SECRETARI OF STATE
TALLABASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE Division of Corporations

2661 Executive Carter Circle West tellohosse, fl 32301 AHn: Octave Simus

February 6, 2019

RICHARD WASERSTEIN 1124 KANE CONCOURSE BAY HARBOR ISLANDS, FL 33154

SUBJECT: JADE HOLDINGS LLC Ref. Number: W19000011940

We have received your document for JADE HOLDINGS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is P17000025974.

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) 245-6051.

Letter Number: 619A00002603

Octavia L Simmons Regulatory Specialist III

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	Jade Holdings LLC					
0000		Name of	Limited Liability (Company		
The en Exister	closed "Application by Foreince, and check are submitted	gn Limited Liability Com to register the above refer	pany for Authoriza enced foreign limi	tion to Transact Busi led liability company	ness in Florida," Certificate of to transact business in Florida.	
Please	return all correspondence cor	ncerning this matter to the	following:			
	Richard Waserste	ein				
		N	lame of Person			
	Firm/Company					
	1124 Kane Conce	ourse				
	Address					
	Bay Harbor Islan	ds, FL 33154				
	* <u>*</u>	City/S	State and Zip Code			
	claudia@closings.c	com				
		E-mail address: (to be use	ed for future annual	report notification)		
For fur	ther information concerning	this matter, please call:				
	Richard Waserstein		305 at (861-8000		
	Name of	Contact Person	Area Code	Daytime Telep	phone 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 Please make check payable		TMENT OF STA	TE		
	\$125.00 Filing Fee	\$130.00 Filing Fee Certificate of St	& 🔲 \$155.00	Filing Fee & ed Copy	\$160.00 Filing Fee, Certificate of Status & Certified Copy	

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

IN COMPILANCE WITH SECTION (4)5.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Jade Holdings LLC			May be a series				
1.	Limited Liability Company; must include "Limited Liability Company; must include "Liability Compa	20/2012	ca 11-0				
(If name unavailable, enter alternate na	ame adopted for the purpose of transacting business in F	lorida. The alternate na	me must include "Limited Liability C	Tempany," "L.L.C," or "LLC.")			
Delaware		61-18	99850				
(Jurisdiction under the law of which foreign limited hability company is organized)		3	3. (FEI number, if applicable)				
4	The Land			_			
	(Date first transacted business in Flonda, if prior t (See sections 605.0904 & 605.0905, F.S. to determ	o registration.) nine penalty liability)					
1124 Kane Concourse		1124 1	Kane Concourse				
5. (Street Address of F	Principal Office)	6	(Mailing Address)				
Bay Harbor Island, FL	33154	Вау Н	arbor Island, FL 33154	50 5			
				13 BB T1			
7. Name and street address	ss of Florida registered agent: (P.O. Bo	x <u>NOT</u> accepta	ble)	LED 22 PH SSEE FLO			
Name:	Richard Waserstein			3: 2 2			
Office Address:	1124 Kane Concourse						
	Bay Harbor Islands,		33154 , Florida	_			
(City)			(Zip code)				
Registered agent's accep	tance: gistered agent and to accept service of	f process for the	above stated limited lial	bility company at the f			

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.

(Regenered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name: Richard Waserstein Name: Jonathan Markovich Manager Manager 1124 Kane Concourse 1124 Kane Concourse Address: Member Address: ■ Member Bay Harbor Island, FL 33154 Bay Harbor Island, FL 33154 Authorized Authorized Person Person Other____ Other_____ Other___ Other_ Name: Manager Manager Member Address: _____ Member Authorized ■Authorized Person Person Other_____ Other Other Manager Name: Manager Member | Address: _____ Member Address: Authorized Authorized Person Person Other____ Other____ Other____ Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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 Richard Waserstein

Typed or printed name of signce

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "JADE HOLDINGS LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE TWENTY-SECOND DAY OF FEBRUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JADE HOLDINGS LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF AUGUST, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 202310070

Date: 02-22-19