F25000001981

(I	Requ		me)	
	Addre			
	Address			
(0	City/Stat	e/Zip/F	hone #)	
PICK-UP] WAI	Г	MAIL
(1	Busines	s Entity	/ Name)	
	Docume	nt Nun	nber)	
Certified Copies		Certifi	cates of	Status
Special Instructions	to Filing	Office	r;	





000309049730

05/16/19--01027--018 *#87.50

SECRETANY OF STATE

JUN 0 3 2019 M. SOLOMON

COVER LETTER

TO: Registration Section Division of Corporations ECA Temple Terrace, Corp.			
SUBJECT:	ation - must include suffix		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation" Certificate of Existence," or "Certificate of Good above referenced foreign corporation to transact b	for Authorization to Transact Business in Florida." Standing" and check are submitted to register the usiness in Florida.		
Please return all correspondence concerning this r Elliot Sasson	natter to the following:		
East Coast Acquisitions, LLC	ne of Person		
Firm 120 W 45th Street, suite 3600	/Company		
NY, NY 10036	Address		
City/S Elliot@eastcoastacq.com	tate and Zip code		
E-mail address: (to be	used for future annual report notification)		
For further information concerning this matter, pl	 ease call: 		
Elliot Sasson 646	338 8400		
	Code Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the following amount:			
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status			

· APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. ECA Temple Terrace, Corp. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp." "Inc." "Co." or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 84-1749524 (State or country under the law of which it is incorporated) (FEI number, if applicable) (Date of incorporation) (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 13115 W Linebaugh Avenue, suite 109, Tampa, FL 33626 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Chris Wild Name: 13115 W Linebaugh Ave, suite 102 Office Address: 33626 Tampa , Florida (City) (Zip code) 9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation 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. (Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or direct	ors:	
A. DIRECTORS Elliot Sasson		
Chairman:		
120 W 45th St, suite 3600, NY, NY 10036 Address:		<u>.</u>
Chris Wild Vice Chairman:		
13115 W Linebaugh Ave, suite 102, Tampa, FL 33626 Address:		
Director:		
Address:		
Director:		
Address:	SIGRETAN	
B. OFFICERS Chris Wild	6	
President:		[
Address:	<u>ားမှ ယ</u> ဘက် ယ	
Elliot Sasson Vice President:		
120 W 45th St, suite 3600, NY, NY 10036 Address:		
Secretary:		
Address:		
Treasurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the a	pplication listing additional officers and/or directors.	
12. Signature of Di	OVE	
The officer or director signing this document (and who is lare true and that he or she is aware that false information stathird degree felony as provided for in s.817.155, F.S. Elliot Sasson 13.	sted in number 11 above) affirms that the facts stated her	
(Typed or printed name and capac	ty of person signing application)	

<u>Delaware</u>

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "ECA TEMPLE TERRACE, CORP." IS DULY

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

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF MAY, A.D. 2019.

Authentication: 202792510

Date: 05-09-19

7406326 8300

SR# 20193560422

You may verify this certificate online at corp.delaware.gov/authver.shtml