M1900006355

(Re	questor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies		of Status
Special Instructions to		
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Office Use Only



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115 N CALHOUN ST., STE. 4 TALLAHASSEE; FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	06/28/2019	
	Merritt Walker	_
Reference	#:1098524	_
	ne: COAST TO COAST	ENTERTAINMENT LLC
⊘ Arti	cles of Incorporation/Authorization	to Transact Business
Am	endment	
Cha	inge of Agent	
☐ Rei	nstatement	PLEASE RETAIN ORIGINAL DATE OF SUBMISISON
Cor	nversion	6/28/2019
☐ Mei	ger	
☐ Dis	solution/Withdrawal	
☐ Fict	itious Name	
Oth	er	
Authorized	Amount:\$125	
Signature:		



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	06/28/2019	
	Merritt Walker	
	1098524	_
		ST ENTERTAINMENT LLC
✓ Article	s of Incorporation/Authorizatio	n to Transact Business
☐ Amen	dment	
☐ Chang	ge of Agent	
☐ Reinst	tatement	PLEASE RETAIN ORIGINAL DATE OF SUBMISISON
☐ Conve	ersion	6/28/2019
☐ Merge	er	
Dissol	iution/Withdrawal	
Fictition	ous Name	
Other_	· · · · · · · · · · · · · · · · · · ·	
Authorized A	mount: \$125	
Signature:	uw	

10 E 40" ST, 10" FL NY, NY 10016 D: +1.212.947.7200 P: 800.221.0102 F: 800.944.6607

COGENCY GLOBAL (HK) LIMITED A HONG KONG LIMITED COMPANY UNIT B, 1/F, LIPPO LEIGHTON TOWER 103 LEIGHTON RD, CAUSEWAY BAY HONG KONG



July 1, 2019

COGENCY

SUBJECT: COAST TO COAST CRANES LLC

Ref. Number: W19000060884

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

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: 719A00013257

Brooke N Kinsey Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:	Coast to Coast Entertainment, LLC.		
 -	Name of Limited Liability Company		
The enclosed "A Existence, and c	application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, heck are submitted to register the above referenced foreign limited liability company to transact busin	Certifi ness in I	cate of Florida.
Please return all	correspondence concerning this matter to the following:		
	Trevor Gianaris		
	Name of Person		
	Coast to Coast Entertainment, LLC.		
	Firm/Company		
	2201 4th Ave N		
	Address		
	Lake Worth Beach,FL 33461-3835		
	City/State and Zip Code		
_	accounting@benchmarkgames.com	19	
	E-mail address: (to be used for future annual report notification)	ξ=	
For further inform	nation concerning this matter, please call:	९ आस २८	; ;;
	Trevor Gianaris <u>at (</u> 561) 253-2228 23	VH 10: 42	r r
	Name of Contact Person Area Code Daytime Telephone Number	<u>.</u>	
	NG ADDRESS: STREET ADDRESS:	2	
	of Corporations Division of Corporations tion Section Registration Section		
P.Ö. Box			
Tallahas	see, Fl. 32314 2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed Please m	l is a check for the following amount: ake check payable to: FLORIDA DEPARTMENT OF STATE		
	5.00 Filing Fee \$\Bigcup \text{S130.00 Filing Fee & Dertificate of Status} \Bigcup \text{S155.00 Filing Fee & Dertificate Copy of Status & Certificate Copy} \Bigcup \text{S160.00 Filing Fee} \text{S160.00 Filing Fee & Dertificate Copy} \Bigcup \text{S160.00 Filing Fee & Certificate Copy} \Bigcup \Bigcup \text{S160.00 Filing Fee & Certificate Copy} \Bigcup \		
	· ·		

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

	BUSINESS IN THE STATE OF FLORIDA: Coast to Coast E	ntortoinm	ont LLC		
(Name of Foreig	n Limited Liability Company; must include "Lim				
	Coast to Coast Crar				
unavailable, enter alternate	name adopted for the purpose of transacting business in	Florida. The alternate	name must include "Limited Liabi	lity Company," "L I	l. C," or "
	ew Jersey	3. 47-3034475 (FEI number, if applicable)			
isdiction under the law of t	which foreign limited liability company is organized)		(FEI number	r, if ∎pplicable)	
	(Dec. Sections as is home in Florida Constitution				
	(Date first transacted business in Florida, if prior (See sections 605 0904 & 605,0905, F.S. to deter	to registration) mine penalty liability)		
	th Ave N.	6	2201 4th A	√ve N.	
(Street Address of	Principal Office)	V	(Mailing Addres	s)	
ike Worth Bea	ach, FL 33461-3835	Lal	e Worth Beach,	FL 33461	-383
					
				•	
) <u>1</u>	19
ne and <u>street addre</u>	ss of Florida registered agent: (P.O. Bo	x <u>NOT</u> accept	able)	注 是	JUN 28
				193	(S)
Name:	COGENCY GLOBA	<u>AL INC</u>	L	A ₂	>
	445 N				<u> </u>
Office Address:	115 North Calhoun St	t. Suite 4	_	% A Ger	AM 10: 4:5
	Tallahassee	_	Florida 32301	>> 1	٠,
	i allanassee	7			

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]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Trevor Gianaris ⊠Manager Name: Manager Name: _____ 2201 4th Ave N. Member Address: __ Member Address: Lake Worth Beach, FL 33461-3835 Authorized Authorized Person Person Other Other_ Other____ Other__ Manager Name: ______ Manager Name: _____ Address: _____ Member Address: ____ Authorized Authorized Person Person Other__ Other____ Other_ Name: _____ Manager Manager Member Address: Member Address: Authorized Authorized Person Person 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 Trevor Gianaris

Typed or printed name of signee

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

COAST TO COAST ENTERTAINMENT LLC 0400716672

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 January 16, 2015.

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:

COGENCY GLOBAL INC 14 SCENIC DRIVE DAYTON, NJ 08810



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 1st day of July, 2019

der A Mun

Elizabeth Maher Muoio State Treasurer

Certificate Number: 6098631785

Verify this certificate online at

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