

MPA000007669

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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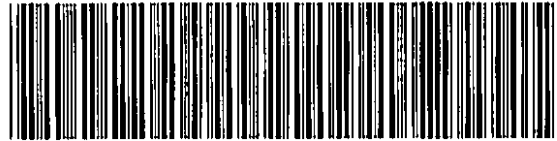
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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AUG 9 2019

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: QUEENS 4 STORES 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:

Louis J. Carbone, Esq.

Name of Person

Louis J. Carbone, P.A.

Firm/Company

90 SE 4th Avenue Suite 1

Address

Delray Beach, Florida 33483

City/State and Zip Code

Louis@Carbonelegal.com

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

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For further information concerning this matter, please call:

Louis J. Carbone

561

272-0282

Name of Contact Person

at ( )

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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY  
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. QUEENS 4 STORES, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," 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," "L.L.C." or "LLC.")

2. NEW YORK

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

13-4182952

3. (FLL number, if applicable)

4. (Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S., to determine penalty liability.)

5. 254 KATONAH AVENUE

(Street Address of Principal Office)

PO BOX 803

6. (Mailing Address)

KATONAH, NEW YORK 10536

KATONAH, NEW YORK 10536

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

Name: LOUIS J. CARBONE, P.A.

Office Address: 90 SE 4TH AVENUE SUITE 1

DELRAY BEACH, FLORIDA

(City)

, Florida

33483

(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.

(Registered agent's signature)

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TALLAHASSEE, FLORIDA

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:**

☒ Manager Name: CHARLES ROSNER

☐ Member Address: 254 KATONAH AVENUE

☐ Authorized KATONAH, NEW YORK 10536

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Title or Capacity:** **Name and Address:**

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Manager Name: \_\_\_\_\_

☐ Member Address: \_\_\_\_\_

☐ Authorized \_\_\_\_\_

Person \_\_\_\_\_

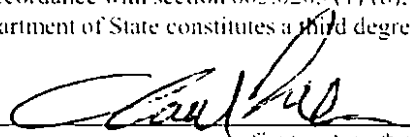
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

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DEPARTMENT OF STATE

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed 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

CHARLES ROSNER

\_\_\_\_\_  
Typed or printed name of signee

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

I hereby certify, that QUEENS 4 STORES, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 06/21/2001, and that the Limited Liability Company is existing so far as shown by the records of the Department.



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 12th day of July two  
thousand and nineteen.*

*Brendan C Hughes*

Brendan C Hughes  
Executive Deputy Secretary of State

***STATE OF NEW YORK***

***DEPARTMENT OF STATE***

I hereby certify that the annexed copy has been compared with the original document in the custody of the Secretary of State and that the same is a true copy of said original.



WITNESS my hand and official seal of the  
Department of State, at the City of Albany, on  
July 16, 2019.

*Brendan C. Hughes*

Brendan C. Hughes  
Executive Deputy Secretary of State

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GWL3

ARTICLES OF ORGANIZATION  
OF  
QUEENS 4 STORES, LLC

Under Section 203 of the Limited Liability Company Law.

**FIRST:** The name of the limited liability company is QUEENS 4 STORES, LLC.

**SECOND:** The county within the state in which the office of the limited liability company is to be located is Westchester.

**THIRD:** The Company does not have a specific date of dissolution in addition to the events of dissolution set forth by law.

**FOURTH:** The Secretary of State is designated as agent of the limited liability company upon whom process against it may be served. The post office address within or without this state to which the Secretary of State shall mail a copy of any process against the limited liability company served upon him or her is:

254 Katonah Avenue  
Katonah, New York 10536

**FIFTH:** The effective date of the Articles of Organization shall be the date of filing with the Secretary of State.

**SIXTH:** The limited liability company is to be managed by 1 or more members.

IN WITNESS WHEREOF, this certificate has been subscribed to this 20th day of June, 2001 by the undersigned who affirms that the statements made herein are true under the penalties of perjury.

*Lawrence A. Kirsch*

Lawrence A. Kirsch, Attorney in Fact



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DEADLINE

GWLB

ARTICLES OF ORGANIZATION  
OF  
QUEENS 4 STORES, LLC

STATE OF NEW YORK  
DEPARTMENT OF STATE

FILED JUN 21, 2001

TAXS

BY:

*jcc*

*jcc*  
Filed by:

Finkel Goldstein Berzow  
Rosenbloom & Nash, LLP  
26 Broadway  
Suite 711, ATTN: Jane Deiana  
New York, New York 10004

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