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Foreign Limited Liability Company ROCCO FORTE & FAMILY LLC

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EXINEE RIP

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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:

ROCCO FORTE &	FAMILY LLC						
(Name of Fore	ign Limited Liability Company, must include "Limite	d Lizbility Compa	ny," "L L.C.," or "LLC.")			_	
Of came unavailable, enter alterna	to name adopted for the purpose of transacting business in Flo	rida. The alternate na	me must include "Listing Liabili	ity Company." "L	L.C. or "L	<u>.c.</u>	
NEW YORK	, , , , , , , , , , , , , , , , , , , ,	81-05	56787	.,,,		,	
2. (Jurisdiction under the law o	of which foreign limited liability company is organized)	3. (FEI number, if applicable)			_		
NOVEMBER 1, 20	18						
4.	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605.0905, F.S. to determine	registration.) ins penalty liability)					
271 MADISON AVENUE 5. (Street Address of Principal Office)		271 M	ADISON AVENUE				
		٥	(Mailing Addres	x)		_	
SUITE 1000		SUITE	2 1000			_	
NEW YORK, NY 10016		NEW YORK, NY 10016					
7. Name and spreet add	lress of Florida registered agent: (P.O. Box	NOT accepta	ble)		2019		
Name:	INCORPORATING SERVICES, LTD.			-	2019 AUG 27	- 2 pag - 2 pa	
Office Address:	1540 GLENWAY DRIVE s:				Ē	ij	
	TALLAHASSEE		32301 , Florida		: 5		
	(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.

SMelissa A. Stops - Assistant Secretary

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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	<u>":</u>	Name and Address:
■Manager	Name: DAVID MACGREGOR	☐ Manager	Name:	
■ Member	Address: 271 MADISON AVENUE	☐ Member	Address:	
Authorized	SUITE 1000	Authorized		
Person	NEW YORK, NY 10016	Person		
Other	Other	Other		Other
Manager	Name:	Manager	Name:	
☐Member	Address:	Member	Address:	
Authorized		Authorized		
Person		Person		
Other	Other	Other		
∐Manager	Name:	☐ Manager	Name:	
Member	Address:	☐ Member	Address:	2019
Authorized		Authorized	-	
Person		Person		27
Other	Other	Other		Other 💝

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.

DAVID MACGREGOR

Typed or printed name of signer

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State of New York Department of State } ss

I hereby certify, that SIR ROCCO FORTE & FAMILY LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 04/11/2002, and that the Limited Liability Company is existing so far as shown by the records of the Department.

A Certificate of Amendment SIR ROCCO FORTE & FAMILY LLC, changing its name to ROCCO FORTE & FAMILY LLC, was filed 05/01/2007.



Witness my hand and the official seal of the Department of State at the City of Albany, this 22nd day of August two thousand and nineteen.

Braden C Higher

Brendan C. Hughes
Deputy Secretary of State

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