

M19000009195

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(City/State/Zip/Phone #)

☐ PICK-UP

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2019 SEP 24 PM 3:53

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B KINSEY

SEP 24 2019



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 28, 2019

DENNIS MCCOY  
104 TINTON PLACE  
EAST NORTHPORT, NY 11731

SUBJECT: TD EQUITIES MANAGEMENT LLC  
Ref. Number: W19000079565

We have received your document for TD EQUITIES MANAGEMENT LLC and your check(s) totaling \$160.00. 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.

Brooke N Kinsey  
Regulatory Specialist II

Letter Number: 819A00017849

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** TD Equities Management 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:

Dennis C. McCoy

\_\_\_\_\_  
Name of Person

TD Equities Managment LLC

\_\_\_\_\_  
Firm/Company

104 Tinton Place

\_\_\_\_\_  
Address

East Northport, NY 11731

\_\_\_\_\_  
City/State and Zip Code

Dmccoyny@aol.com

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

For further information concerning this matter, please call:

Dennis McCoy

516

356-0304

\_\_\_\_\_  
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. TD Equities Management 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)

3. 84-2201425

(FEI number, if applicable)

4. NONE AS OF YET

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

5. 104 Tinton Place

(Street Address of Principal Office)

6. 104 Tinton Place

(Mailing Address)

East Northport, NY 11731

East Northport, NY 11731

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

Name:

REGISTERED AGENTS INC.

Office Address:

7901 4TH ST N STE 300

ST PETERSBURG

(City)

Florida

33702

(Zip code)

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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.

*Bill Hume*

(Registered 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]:

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

☒ Manager Name: Dennis C. McCoy  
☒ Member Address: 104 Tinton Place  
☒ Authorized East Northport, NY 11731  
Person  
☐ Other ☐ Other

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

☐ Manager Name: Thomas Cosenza  
☒ Member Address: 15 Cayla Lane  
☒ Authorized Port Jefferson Station NY 11776  
Person  
☐ Other ☐ Other

☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person  
☐ Other ☐ Other

☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person  
☐ Other ☐ Other

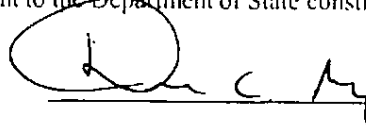
☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person  
☐ Other ☐ Other

☐ Manager Name: \_\_\_\_\_  
☐ Member Address: \_\_\_\_\_  
☐ Authorized \_\_\_\_\_  
Person  
☐ 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.

 MANAGING member  
Signature of an authorized person

Dennis C. McCoy

Typed or printed name of signee

State of New York  
Department of State } ss:

I hereby certify, that TD EQUITIES MANAGEMENT LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 06/25/2019, and that the Limited Liability Company is existing so far as shown by the records of the Department.



\*\*\*

WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 16th day of September two  
thousand and nineteen.

*Brendan C. Hughes*

Brendan C Hughes  
Executive Deputy Secretary of State