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T GLASS DEC 0 2 2019 CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.	: 12000000195
REFERENCE	: 061968 8051746
AUTHORIZATION	: Louis de man
COST LIMIT	== \$C155.00 }
ORDER DATE : November 25, 201  ORDER TIME : 1:40 PM	19
ORDER 11ME : 1:40 FM  ORDER NO. : 061968-005	
CUSTOMER NO: 8051746	2
<u>FOREIGN</u>	27
NAME: ASHORE PROPER	RTY MANAGEMENT LLC
XXXX QUALIFICATION (TYPE: I	<u></u> )
PLEASE RETURN THE FOLLOWING AS  XX CERTIFIED COPY  PLAIN STAMPED COPY  CERTIFICATE OF GOOD ST	
CONTACT PERSON: Amanda Robins	son EXT# 62968

EXAMINER:

## **COVER LETTER**

TO: Registration Section

Div	vision of Corporation	18					
SUBJECT:	Ashore Property Ma	nagement LLC		·			
		Name of Limited Liability Company					
				ation to Transact Business in Florida ited liability company to transact bus			
Please return	n all correspondence c	oncerning this matter to the following	lowing:				
	Blake R. Laure	nce, Esq.					
	Name of Person						
	Davison, Eastman, Munoz, Paone P.A.						
	Firm/Company						
	100 Willow Brook Road, Suite 100						
	Address						
	Freehold, NJ 07728						
	City/State and Zip Code						
	blaurence@respo	ndlaw.com					
		E-mail address: (to be used fo	r future annua	l report notification)	_		
For further in	nformation concerning	g this matter, please call:			2019 !:		
Bla	ake R. Laurence, Esq.	а	732 t (	462-7170	<b></b> :		
	Name o	f Contact Person	Area Code	Daytime Telephone Number	27		
Div Reg P.O	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 lahassee, FL 32314			STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	7.10:11		
	closed is a check for th ase make check payab	e following amount: le to: FLORIDA DEPARTMI	ENT OF STA	, ,			
	\$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status		Filing Fee & S160.00 Filing fied Copy Status & Ce	g Fee, Certificate ertified 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:

laware	_	30-0871033	
resilection under the law of which foreum limited lightlier compa	7	3.	
ansaction direct the taw of which follows inflated habitity company	ny is organized)	(FEI number, if applie	able)
(Date first transacted busines (See sections 605,0904 & 60	ss in Florida, if prior to registrati 05.0905, F.S. to determine penalt	on.) ly liability)	
Pavilion Ave STE 2	,	48 Pavilion Ave STE 2	
(Street Address of Principal Office)	6	(Mailing Address)	
ong Branch, NJ 07740		Long Branch, NJ 07740	
			25
me and street address of Florida registered a	gent: (P.O. Box <u>NOT</u>	_acceptable)	2
Corporation Service	Company		7
1201 Hays Street			10:
Office Address:		32301	_
	(City)	Florida(Zip code)	
	(=","	(2.5 000)	
tered agent's acceptance:	cept service of process	for the above stated limited liability	company at the p.
y veen namea as registerea agent ana to ac			

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:
Manager	Name: Seawinds Properties LLC	☐ Manager	Name: Wolfco Capital LLC
<b>■</b> Member	Address: 48 Pavilion Ave	Member	Address: 15 Stratton Rd
Authorized	STE 2	☐ Authorized	Scarsdale, NY 10583
Person	Long Branch, NJ 07740	Person	
Other	Other	Other	Other
Manager	Name: Shexco LLC	Manager	Name:Blake R. Laurence, Esq.
Member	Address: 19 Dove Mill Crescent	Meinber	Address: 100 Willow Brook Rd
Authorized	Jackson, NJ 08527	Authorized	STE 100
Person		Person	Freehold, NJ 07728
Other	Other	Other	Other
☐Manager ☐Member ☐Authorized Person	Name:	☐ Manager ☐ Member ☐ Authorized Person	Name: 22 27 210 100 100 100 100 100 100 100 100 100
Other	Other	Other	Other
indexed individuals  9. Attached is a cert jurisdiction under th of the translator mus  10. This document is	s executed in accordance with section 605.0 ment to the Department of State constitutes a	Florida Department of State Id, duly authenticated by the cate is in a foreign language, 203 (1) (b), Florida Statutes.	Annual Report form.  official having custody of records in the a translation of the certificate under oath  I am aware that any false information

Page 1



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

DELAWARE, DO HEREBY CERTIFY "ASHORE PROPERTY MANAGEMENT, LLC" IS

DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF NOVEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ASHORE PROPERTY MANAGEMENT, LLC" WAS FORMED ON THE THIRTIETH DAY OF APRIL, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

2019 1: 27 7:110: 11



Authentication: 204100090

Date: 11-27-19