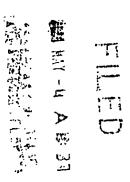
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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	-
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MAY **0** 5 222) To 1,500 copyr

COVER LETTER

TO: Registration Section

Divisi	ion of Corporations		
SUBJECT:	DURANTE EC	RUIPMENT LLC	
-	Nam	e of Limited Liability Company	
The enclosed * Existence, and	Application by Foreign Limited Liability check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida.	
Please return a	Il correspondence concerning this matter t	to the following:	
	GREGG FRANCIS		
		Name of Person	
	DURANTE EQUIPMENT LLC		
		Firm/Company	
	3300 N. 28TH TERRACE		
		Address	
	HOLLYWOOD, FLORIDA 33020		
	C	ity/State and Zip Code	
	gfrancis@duranteequip.com		
	E-mail address: (to be	e used for future annual report notification)	
For further info	ormation concerning this matter, please ca	n:	
Paule	Rubeo	914 774-0093	
	Name of Contact Person	Area Code Daytime Telephone Number	
	stration Section	Street Address: Registration Section	
	sion of Corporations	Division of Corporations	
P.O.	Box 6327	The Centre of Tallahassee	
Taila	hassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Please	sed is a check for the following amount: make check payable to: FLORIDA DEF	PARTMENT OF STATE	
,Æ Si:	25.00 Filing Fee \$130.00 Filing Fe Certificate of	e & 🗆 \$155.00 Filing Fee & 🗆 \$160.00 Filing Fee, Certificate	



April 22, 2020

GREGG FRANCIS 3300 N 28 TERR HOLLYWOOD, FL 33020

SUBJECT: DURANTE EQUIPMENT LLC

Ref. Number: W20000039843

We have received your document for DURANTE EQUIPMENT LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The documnt you sent in is for a Foreign Corporation. You will need to send in the document for a Foreign LLC.,

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.

Tracy L Lemieux Regulatory Specialist II

RECEIVED

Letter Number: 520A00008410

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY COMPANY/TOTRANSACTBUSINESS IN THE STATE OF FLORIDA:

Dulaman	me adopted for the purpose of transacting business in	Florida The alt	emate name must include "Limited Liability C	Company," "L. L. C," or "LL C
Delaware		3.	84-2433505	
(Jurisdiction under the law of wh	ich foreign limited hability company is organized)	,1,	(l'El number, (l'	applicable)
8-2019				
	(Date lifst transacted business in Florida, if prior (See sections 605 0904 & 605 0905, F.S. its dete	to registration mune penalty l	j abilny)	_
3300 N 28th Terrace			3300 N 28th Terrace	
(Street Address of Principal Office)		6(Mailing Address)		
Hollywood, Florida 330	20		Hollywood, Florida 33020	
Name and street address	s of Florida registered agent: (P.O. Bo	ox <u>NOT</u> a	eceptable)	3 整 一门
Name and street address Name:	s of Florida registered agent: (P,O, Boundary) REGISTERED AGENTS INC.	ox <u>NOT</u> a	cceptable)	
		ox <u>NOT</u> a	cceptable)	
Name:	REGISTERED AGENTS INC.	ox <u>NOT</u> a	cceptable)	

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: Name: Gregg Francis Name: John E Durante Manager Manager 3300 N. 28th Terrace Address: Address: 3300 N. 28th Terrace Member Member Hollywood, Florida 33020 Hollywood, Florida 33020 Authorized Authorized Person Person Other CFO President Other Other Other____ Manager Name: Manager Name: Member Address: Member Address: ■ Authorized Authorized Person Person Other ____Other____ Other___ Other____ Name: Manager Manager Name: Member Address: Member Address: Authorized Authorized Person Person Other_ 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 goastitutes whird degree felony as provided for in s.817.155, F.S. Gregg Francis

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "DURANTE EQUIPMENT, 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 SECOND DAY OF APRIL, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DURANTE EQUIPMENT, LLC" WAS FORMED ON THE TWENTIETH DAY OF SEPTEMBER, A.D. 2019.

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

Authentication: 202701742

Date: 04-02-20

7617688 8300 SR# 20202550514