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COVER LETTER

TO: Registration Section Division of Corporations

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Courtside Market LLC

<u>.</u>،

SUBJECT: _____

•*

4

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:

Norman Grafstein			
	Name of Person		
	Firm/Company		
16884 Strasbourg Ln			
	Address		
Delray Beach, FL 33446			
cpa@rossstrent.com	ity/State and Zip Code :	20 H	
E-mail address: (to be	used for future annual report notification)		
urther information concerning this matter, please cal	It:		
Christopher Brown	631 629-4488		
Name of Contact Person	Area Code Daytime Telephone.	Number &	
<u>Mailing Address:</u> Registration Section	Street Address: Registration Section		
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEF \$125.00 Filing Fee \$130.00 Filing Fe Certificate of	e & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 F	iling Fee. Certif tus & Certified (

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:

, Courtside M	arket LLC
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f name unavailable, enter alternate ni	ime adopted for the purpose of transacting business in Flo	orida The alter	nate name must include "Limited Lia	bility Company," "L.U.C," or "I	
New York		27	7-4238965		
(Jurisdietion under the law of which foreign limited hability company is organized)			(FEI numbe	FEI number, if applicable)	
•	(Date first transacted business in Florida, if prior to	registration.)			
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605.0905, F.S. to determi	ne penalty liab	dity)		
16884 Strasbourg Lane		16 6.	884 Strasbourg Lane (Mailing Address)		
treet Address of Principal Office)			(Mailing Address)		
Delray Beach, FL 3344	6	De	hray Beach, FL 33446	- 20 	
<u></u>					
. Name and <u>street addres</u>	<u>s</u> of Florida registered agent: (P.O. Box	NOT acc	eptable)	「 1997日 1977日 1977日 日 1977 1977	
Name:	Norman Grafstein				
	16884 Strasbourg Lane				
Office Address:	Delray Beach		 33446 . Florida		
	(Crv)		, FIOLICIA (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.

Morman Julptein member (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:	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
□Manager	Norman Grafstein	□Manager	Name:
Member	Address:	🔳 Member	Address:
Authorized	Delray Beach, FL 33446	□Authorized	Delray Beach, FL 33446
Person	·····	Person	
□Other		□Other	Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		Authorized	
Person		Person	<u> </u>
Other	Other	□Other	
□Manager	Name:	□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 constitutes a third degree felony as provided for in s.817.155, F.S.

Morman Graplen Member Signature of a ratherized person

State of New York Department of State } ss:

I hereby certify, that COURTSIDE MARKET LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 12/06/2010, and that the Limited Liability Company is existing so far as shown by the records of the Department.

The Biennial Statement is past due.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 05th day of May two thousand and twenty.

Brandan C. Hughan

Brendan C Hughes Executive Deputy Secretary of State