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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITCL SERVICES, INC.

Account Number : I20160000017

Phone

: (855)498-5500

Fax Number

: (800) 432-3622

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

<u> </u>	Email	Address:	_
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Foreign Limited Liability Company LAFACE FLOORING, LLC

Certificate of Status	0
Certified Copy	
Page Count	05
Estimated Charge	\$155.00

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Corporate Filing Menu

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H21000292022

COVER LETTER

TO:	Registration Section Division of Corporations		
	LAFACE FLOORING, LLC		
SUBJI	CCT:Name	of Limited Liability Company	
The en Exister	closed "Application by Foreign Limited Liability Coce, and check are submitted to register the above r	Company for Authorization to Transact Business in Florida," referenced foreign limited liability company to transact busin	Certificate of ness in Florida.
Please	return all correspondence concerning this matter to	the following:	
	DOMENICO LAFACE		
		Name of Person	
	LAFACE FLOORING, LLC		
		Firm/Company	
	971 SPENCER ST		
		Address	
	SYRACUSE, NY 13204		
	C	ity/State and Zip Code	. 2
	DOM@LAFACEFLOORING.COM		2021 AUG
	E-mail address: (to be	c used for future annual report notification)	AUG (
For fu	ther information concerning this matter, please cal	u:	. (,,
DOMENICO LAFACE		at (2 PH
	Name of Contact Person	Area Code Daytime Telephone Number	1:42
Mailing Address: Registration Section		Street Address: Registration Section	* 2
Division of Corporations		Division of Corporations	
P.O. Box 6327		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 Fee	PARTMENT OF STATE cc & S155.00 Filing Fee & S160.00 Filing Fee,	

Certificate of Status

Certified Copy 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:

, LAFACE FLOORING,	LLC				_
(Name of Foreign L	imited Liability Company, must include "Limited Lia	ability (Company," "L.L.C.," or "LLC.")		
Communication of the communica	une adopted for the purpose of transacting business in Florids	a. The ab	ernate name must include "Limited Liability	Company," "L.L.C," or "	u.c.ŋ
			81-2755 94 8		
NEW YORK STATE 2.			(FEI number, if a	- Italian	-
(Jurisdiction under the law of wh	ich imeign limited liability company is organized)		(PEI number, 12 a	ррисков)	
8/31/2021				_	
4	(Date first transacted business in Florida, if prior to regis (See sections 605.0904 & 605.0905, F.S. to determine p	uration.) enalty li	ability)	_	
971 SPENCER ST		6. <u>_</u>	71 SPENCER ST		
5. (Street Address of Principal Office)		U	(Mailing Address)		-
SYRACUSE, NY 1320	4	9	SYRACUSE, NY 13204		
7. Name and street address Name:	s of Florida registered agent: (P.O. Box N		cceptable)	2021 AUG 72 F	ميا ا إ⊷يتي
Office Address:	515 E. Park Avc., Floor 2			PH 1. 40	
	Tallahassec		32301 , Florida	_	- ა
	(City)		(7.ip code)		
designated in this applicate to comply with the provision	gistered agent and to accept service of pro tion, I hereby accept the appointment as r ons of all statutes relative to the proper an s of my position as registered agent.	egiste nd con	red avent and avree to act in in	is capacuy. 1 jur is, and I am famil	inei ugiee
	Touylon Stay (Roginacrod agent's rige	Capit	ol Corporate Services, Inc.	_	

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]:

9610 WHITE TAIL PATH	□Manager	Ivanic.	GELA LAFAC		
		9	610 WHITE TA		
Address: 9610 WHITE TAIL PATH	□Member				
□Authorized BREWERTON, NY 13209		BREWERTON, NY 13209			
	Person				
Other	Other		□Other		_ _
JAMES MESSENGER	□Manager	Name:			
Address:	□Member	Address: _			
SUITE 703	□Authorized				
SYRACUSE NY 13202	Person	· · · · ·		_	
□ Other	Other		Other		
				202	
Name:	□Manager	Name:		<u> </u>	1175
Address:	□Member	Address: _	· •••	-10 -	
	□Authorized			P	*677 (4)
	Person		_ -	<u> </u>	÷(t
Other	Other		Other_	~ ~	
	JAMES MESSENGER 440 SOUTH WARREN ST Address: GUITE 703 SYRACUSE NY 13202 Other Name: Address:	Person Other	Person	Authorized Person Other O	Authorized Person Other Other

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.

Dampy	e ro Zyoun
S	ignature of an authorized person
DOMENICO LAFACE	
 	Evned or mutod name of signee

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROSSANA ROSADO, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: LAFACE FLOORING, LLC

DOS ID Number: 4953271

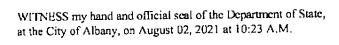
Entity Type: DOMESTIC LIMITED LIABILITY COMPANY

Entity Status: EXISTING

Date of Initial Filing with DOS: 05/25/2016

Statement Status: CURRENT
Statement Due Date: 05/31/2022

No information is available from this office regarding the financial condition, business activity or practices of this entity:



ROSSANA ROSADO, Secretary of State

Brandon C Higher

By Brendan C. Hughes
Executive Deputy Secretary of State

Authentication Number: 100000178302 To Verify the anthenticity of this document you may access the Division of Corporation's Document Authentication Website at http://ecorp.dos.ny.gov