

W22000002998

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

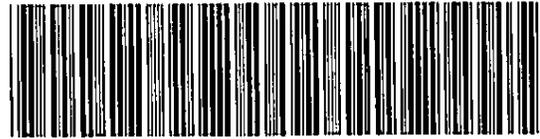
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

emailed 2/24/22
cert

W21000156464

Office Use Only



400377339344

12/06/21--01012--010 **125.00

FILED
2022 FEB 24 PM 8:09
S. FRANKLIN

S. FRANKLIN

FEB 25 2022

COVER LETTER

TO: Registration/Section
Division of Corporations

SUBJECT: No Brick Funding, 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:

Andrew Bensch
Name of Person
No Brick Funding LLC
Firm/Company
160 Morgan Street, Suite 1203
Address
Jersey City, NJ 07302
City/State and Zip Code
andrew.bensch@nobrickllc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Andrew Bensch 917 428-4413
Name of Contact Person at () Area Code Daytime Telephone Number:

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

FILED
2022 FEB 24 PM 8:09
TALLAHASSEE, FL

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. No Brick Funding, LLC
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

2. New York State (Jurisdiction under the law of which foreign limited liability company is organized)
3. 87-1012671 (FEI number, if applicable)

4. 11/02/2021 (Date first transacted business in Florida, if prior to registration. (See sections 605.0904 & 605.0905, F.S. to determine penalty liability))

5. 150 Bay Street (Street Address of Principal Office)
Suite 314
Jersey City, NJ 07302
6. 150 Bay Street (Mailing Address)
Suite 314
Jersey City, NJ 07302

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

Name: URS Agents, LLC
Office Address: 3458 Lakeshore Drive
Tallahassee, Florida 32312
(City) (Zip code)

FILED
2022 FEB 24 PM 8:09
TALLAHASSEE, FL

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.

URS Agents, LLC by: [Signature]
(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: Manager **Name:** Andrew Bensch
 Member **Address:** 160 Morgan Street
 Authorized **Apt** 1203
Person Jersey City, NJ 07302
 Other _____ Other _____

Manager **Name:** Mark Weiss
 Member **Address:** 574 Alda Rd
 Authorized **Mamaroneck, NJ 10543**
Person _____
 Other _____ Other _____

Manager **Name:** _____
 Member **Address:** _____
 Authorized _____
Person _____
 Other _____ Other _____

Title or Capacity: Manager **Name:** Matthew Bensch
 Member **Address:** 90 Christopher Columbus Blvd
 Authorized **Apt** 3300
Person Jersey City, NJ 07302
 Other _____ Other _____

Manager **Name:** _____
 Member **Address:** _____
 Authorized _____
Person _____
 Other _____ Other _____

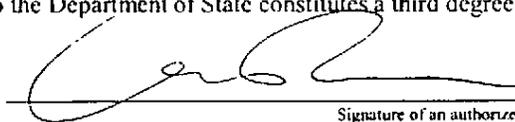
Manager **Name:** _____
 Member **Address:** _____
 Authorized _____
Person _____
 Other _____ Other _____

2022 FEB 24 PM 8:09
 FILED
 ALLIANCE SEB, FL

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.



 Signature of an authorized person

Andrew Bensch

 Typed or printed 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: NO BRICK FUNDING, LLC
DOS ID Number: 6027210
Entity Type: DOMESTIC LIMITED LIABILITY COMPANY
Entity Status: EXISTING
Date of Initial Filing with DOS: 06/02/2021
Statement Status: CURRENT
Statement Due Date: 06/30/2023

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

FILED
2022 FEB 24 PM 8:09
TALLAHASSEE, FL

WITNESS my hand and official seal of the Department of State, at the City of Albany, on October 14, 2021 at 10:48 A.M.

ROSSANA ROSADO, Secretary of State

Brendan C. Hughes

By Brendan C. Hughes
Executive Deputy Secretary of State



Authentication Number: 100000488919 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at <http://ecorp.dos.ny.gov>