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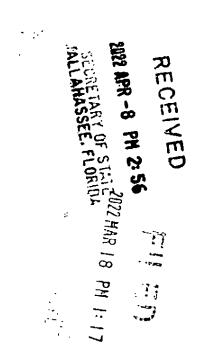
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. C19 STAFFING LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LI,C.")

	name adopted for the purpose of transacting business in Fl	lorida. The alterna	ate name must include "Limited Liabi	hty Company," "I	L. <i>C</i> ," or	"LLC."
New York		1				
(Jurisdiction under the law of which foreign limited liability company is organized)		J	(FEI number,	if applicable)		_
· 	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determi	registration.)	ny)			
2980 QUENTIN RD.	voce sections does over the description of the determine					
Street Address of Principal Office)		6	0 QUENTIN RD. (Mailing Address)			_
reet Aduress of Principal (Mice)						
BROOKLYN, NY 112	229	BRC	OOKLYN, NY 11229			
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Name and street address	ss of Florida registered agent: (P.O. Box	NOT accep	etable)	-	2022 MAR	
Name:	Elliot Spiegel			5.	8	
Natire,	1		_		P	i
Office Address:	21662 Napa Court			— The		٩,,
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	Boca Raton		33433 , Florida			
	(City)	-	(Zip code)			

/s/ Elliot Spiegel

(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: Name and Address: Title or Capacity: Name and Address: Zev Marmurstein Name: □Manager □Manager Name: 150 W 46th Street Address: **■**Member □Member Address: ____ New York, NY 10036 ☐ Authorized □ Authorized Person Person □Other Other____ Other____ □Other □ □ Manager Name: _____ □Manager Name: ____ □Member Address: ____ ☐Member Address: _____ ☐ Authorized □Authorized Person Person □Other □Other Other____ □Other □ Manager Name: ____ □ Manager Address: □Member □Member ☐ 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. /s/ Elliott Teitelbaum Signature of an authorized person Elliott Teitelbaum Typed or printed name of signee

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I. ROBERT J. RODRIGUEZ. 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:

C19 STAFFING LLC

DOS ID Number:

6357335

Entity Type:

DOMESTIC LIMITED LIABILITY COMPANY

Entity Status:

EXISTING

Date of Initial Filing with DOS:

12/27/2021

Statement Status:

CURRENT

Statement Due Date:

12/31/2023

I certify that the following is a list of documents on file in the Department of State for said entity:

Document Type:

ARTICLES OF ORGANIZATION

Date of Filing:

12/27/2021

Entity Name:

C19 STAFFING LLC

MR 18 PH 1:

Above space is left blank intentionally.

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



WITNESS my hand and official scal of the partment of State, at the City of Albany, on April 07, 2022 at 04:05 P.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C Hylso

By Brendan C. Hughes
Executive Deputy Secretary of State

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