Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220001904973)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : INTERSTATE FILINGS LLC

Account Number : I20110000086 Phone : (718)569-2703 Fax Number : (718)504-7890

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

Email Address: orders@Interstatefilings.com

Foreign Limited Liability Company 700 N PALMETTO STREET II LLC

Certificate of Status	U
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

10N - 1 2022 T. LEMIEUX  $(((1122000190497\ 3)))$ 

FILED

			2022 MAY 31 AM 11: 25
	IN FLO	ORIDA	
IN COMPLIANCE WITH SECT COMPANY TO TRANSACT BUS	ION 605.0902, FLORIDA STATUTES. THE FO INESS: IN THE STATE OF FLORIDA:	HOWN	G IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
. 700 N PALMETTO ST	REETHLLC		
(Name of Foreign I	Junited Liability Company; must include "Limited	Tahihiy	Company, "L.L.C.," or "L.L.C."
If name unavailable, enter ellernate na	our adopted for the purpose of transacting business in Flo	яны Пе	alternate name must include "Limited Unability Company," "U. L.C." or "FEC")
DELAWARE		3.	
(furisdiction under the faw of wh	nell foreign limited lightliny company is organized)		(FEI numbér, if suplicable)
4.	(Date first transacted business in Florida 31 puns 65) (See sections 603 6001 & 603 0003, F.S. to determin	egistration ne penalty	(Labilly)
2071 Flatbush Avenue,	Suite 22		2071 Flatbush Avenue, Suite 22
5. (Street Address of Principal Office)		6.	(Mailing Audress)
Brooklyn, NY 11234			Brooklyn, NY 11234
7. Name and street addres	s of Florida registered agent (P.O. Box	NOT:	acceptable)
Name.	Interstate Agent Services, LLC		
Office Address:	100 SE 2nd Street State 2000 #209		
	Miami		33131 , Florida
,	(Cny)		Florida
designated in this applica to comply with the provisi	gistered agent and to accept service of p tion. I hereby accept the appointment a	s regist	for the above stated limited liability company at the place ered agent and agree to act in this capacity. I further agree mplete performance of my duties, and I am familiar with
	(Registated agent's	signature)	
	(((112200019	0497 3	)))

From: Alexander Englard

Page: 4 of 5

(((11220001904973)))

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 Canacity:	Name and Address:			
	Name: Eliezer Scheiner	Manager	Name Scheiner Holdings LLC			
□Member	Address: 2071 Flatbush Avenue Suite 22	Member	Address: 2071 Flatbush Avenue Suite 22			
□Authorized	Brooklyn, NY 11234	☐ Authorized	Brooklyn, NY 11234			
Person		Person				
Other Managing	Member TOther	Managing  Other	Member Other			
;						
□Manager	Name:	_Manager	Name:			
□Member	Address:	□Member	Address:			
□Authorized		☐ Authorized				
Person		Person				
□Other	Other	Other				
□Manager	Name:	⊡Manager	Name:			

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.

■ Member

Authorized

Person

\_\_Other\_\_

Address:

Other\_\_\_\_

Address:

□Other\_\_\_\_\_

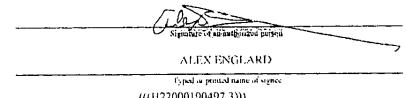
□Member

□ Authorized

Person

□(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 \$.817.155, F.S.



(((H220001904973)))

(((11220001904973)))

## Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "700 N PALMETTO STREET II 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 THIRTY-FIRST DAY OF MAY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "700 N PALMETTO STREET II LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF APRIL, A.D. 2022.

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

6768096 8300

SR# 20222497313

You may verify this certificate online at corp.delaware.gov/authver.shtml

Janffey W. Bullack, Secretary of State

Authentication: 203553741

Date: 05-31-22