

M22 000015855

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

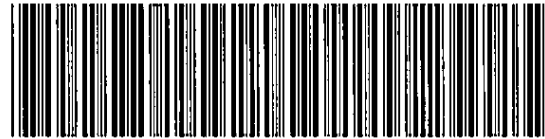
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 OCT 13 PM 5:48

Office of Economic
Development
TALLAHASSEE, FLORIDA

2022 OCT 13 PM 1:11

RECEIVED

S. FRANKLIN
OCT 14 2022

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 10/13/22

****WALK IN****

ENTITY NAME ONE REMINGTON LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXX

Plain Copy
Certified Copy
Certificate of Status

2022 OCT 13 PM 5:18

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments
Certified Copy of Arts & Amendments Complete File (Including Annual Reports)
Certificate of Status
Certificate of Status Reflecting: _____

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$ 155

ACCOUNT # I20140000108
United Corporate
Services, Inc.

Keith Sheppard

Please call Tina at the above number for any issues or concerns. Thank you so much!

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. ONE REMINGTON, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," 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," "L.L.C." or "LLC.")

2. New York (Jurisdiction under the law of which foreign limited liability company is organized) 3. 63-2696886 (FEI number, if applicable)

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

5. 466 East Brighton Avenue, Suite 100
(Street Address of Principal Office)

Syracuse, New York 13210

6. 466 East Brighton Avenue, Suite 100
(Mailing Address)

Syracuse, New York 13210

2010-13
11:54 AM

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

Name: United Corporate Services, Inc.

Office Address: 3458 Lakeshore Drive

Tallahassee, Florida 32312
(City) (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.

/s/ Michael A. Barr, President

(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:**

Manager Name: Gregory A. Cleghorn

Member Address: 466 East Brighton Avenue, Suite 100

Authorized Syracuse, New York 13210

 Person _____

Other _____ Other _____

Title or Capacity: **Name and Address:**

Manager Name: Colin P. Cleghorn

Member Address: 466 East Brighton Avenue, Suite 100

Authorized Syracuse, New York 13210

 Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

 Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

 Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

 Person _____

Other _____ Other _____

Manager Name: _____

Member Address: _____

Authorized _____

 Person _____

Other _____ Other _____

10/22/01 1:10 PM EST

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.

/s/ Gregory A. Cleghorn

Signature of an authorized person

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: ONE REMINGTON, LLC
DOS ID Number: 5450487
Entity Type: DOMESTIC LIMITED LIABILITY COMPANY
Entity Status: EXISTING
Date of Initial Filing with DOS: 11/29/2018
Statement Status: CURRENT
Statement Due Date: 11/30/2022

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: 11/29/2018
Entity Name: ONE REMINGTON, LLC

Document Type: CERTIFICATE OF PUBLICATION
Date of Filing: 02/20/2019

Document Type: CERTIFICATE OF CHANGE
Date of Filing: 03/26/2019

Document Type: BIENNIAL STATEMENT
Date of Filing: 03/18/2021
Effective Date: 11/01/2020

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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 seal of the Department
of State, at the City of Albany, on July 15, 2022 at
12:32 P.M.

2022 JUL 15 12:32 PM

ROBERT J. RODRIGUEZ, Secretary of State



Brendan C. Hughes

By Brendan C. Hughes
Executive Deputy Secretary of State

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