M2300002889

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S. FRANKLIN MAR - 3 2003

COVER LETTER

	Name	of Limited Liability Company			
		Company for Authorization to Transact Business in Florida, referenced foreign limited liability company to transact business.			
return al	correspondence concerning this matter to	the following:			
	DAVID GOLDSTEIN				
		Name of Person			
NOBLE CONSTRUCTION GROUP, LLC					
	· · · · · · · · · · · · · · · · · · ·	Firm/Company			
	1 HARMON PLAZA #1004				
		Address			
	SECAUCUS, NJ 07094				
	Ci	ity/State and Zip Code	78		
	DGOLDSTEIN@NCGLLC.COM		7		
	E-mail address: (to be	used for future annual report notification)	.2		
ther info	rmation concerning this matter, please cal	I:	24 1		
DAVI	D GOLDSTEIN	201 770-1120 at ()	: 		
	Name of Contact Person	Area Code Daytime Telephone Number			
Regis Divis P.O. I	ng Address: Itration Section ion of Corporations Box 6327 hassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	·		

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

IN COMPLIANCE WITH SECTION 005.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	aine adopted for the purpose of transacting business in Flo			J. J	
NEW YORK STATE		3	7-2429116 (FEI number, if app	T	
(Jurisdiction under the law of which foreign limited hability company is organized)		(FEI number, 1		іт аррысябіе)	
	(Date first transacted business in Florida, if prior to r (See sections 605.0904 & 605.0905, F.S. to determin	egistration.)			
366 N BEAUMONT A	VENITE		HARMON PLAZA #1004		
treet Address of Principal Office)		6	(Mailing Address)		
KISSIMMEE, FL 34741-5125		SI	CAUCUS NJ 07094		
				B	
. Name and street address	ss of Florida registered agent: (P.O. Box	NOT acc	eeptable)	+) ====================================	
Name:	NOBLE SKYVIEW FLORIDA LLC		_		
Office Address:	366 N BEAUMONT AVENUE			.) C	
	KISSIMMEE		34741-5125 , Florida		
	(City)		(Zip code)		

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:
□Manager	Name: Edward M Geerlof Ir	□Manager	Name: Charles Becker 300 East 56th Street, Apt 11B Address: New York NY 10022	
■Member	Address: 71 Huff Terrace	■Member		
□Authorized	Montvale NJ 07645	□Authorized		
Person		Person		
□Other	Other	□Other		□Other
□Manager	Name:	□Manager	Name:	
■Member	Address: 3 Meriwether Trail	□Member	Address: _	78.00
□Authorized	Congers NY 10920	□Authorized		
Person		Person		70 E
□Other	Other	Other		Other
				
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address: _	
□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. 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.

Manuels Galaster -

David S. Goldstein

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: NOBLE CONSTRUCTION GROUP, LLC

DOS ID Number: 3938564

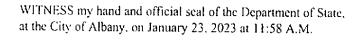
Entity Type: DOMESTIC LIMITED LIABILITY COMPANY

Entity Status: EXISTING
Date of Initial Filing with DOS: 04/19/2010

Statement Status: PAST DUE DATE

Statement Due Date: 04/30/2016

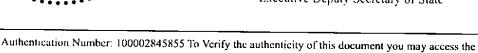
No information is available from this office regarding the financial condition, business activity or practices of this entity.



ROBERT J. RODRIGUEZ, Secretary of State

Brandon C Heylan

By Brendan C. Hughes
Executive Deputy Secretary of State



Division of Corporation's Document Authentication Website at http://ecorp.dos.ny.gov





February 14, 2023

Fam.

DAVID GOLDSTEIN 1 HARMON PLAZA #1004 SECAUCUS, NJ 07094 US

SUBJECT: NOBLE CONSTRUCTION GROUP, LLC

Ref. Number: W23000020624

We have received your document for NOBLE CONSTRUCTION GROUP, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin Regulatory Specialist II

Letter Number: 923A00003612

Updated Name included

RECEIVED