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Florida Department of State
Division of Corporations
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Foreign Limited Liability Company

SKY GALAXY 1, LLC

Certificate of Status	0
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Page Count	04
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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 TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. SKY GALAXY 1, 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. 27-3518953
(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. 2577 Main Street Ste 2
Lake Placid, NY 12946
(Street Address of Principal Office)

6. 2577 Main Street Ste 2
Lake Placid, NY 12946
(Mailing Address)

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

Name: Registered Agent Solutions, Inc.

Office Address: 155 Office Plaza Drive, Suite A

Tallahassee (City), Florida 32301 (Zip code)

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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.

Mackenzie Hibler, Asst. Secretary
(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:
☐ Manager	Name: Yuri J. Gaspar	☐ Manager	Name:
☒ Member	Address: 2577 Main Street Ste 2	☐ Member	Address:
☐ Authorized	Lake Placid, NY 12946	☐ 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	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.

Signature of an authorized person

Yuri J. Gaspar-MEMBER

Typed or printed name of signee

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I ROBERT 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 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:	SKY GALAXY LLC
DOS ID Number:	3998121
Entity Type:	DOMESTIC LIMITED LIABILITY COMPANY
Entity Status:	EXISTING
Date of Initial Filing with DOS:	09/21/2010
Statement Status:	CURRENT
Statement Due Date:	09/30/2024

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

Document Type:	ARTICLES OF ORGANIZATION
Date of Filing:	09/21/2010
Entity Name:	SKY GALAXY LLC

Document Type:	CERTIFICATE OF PUBLICATION
Date of Filing:	03/30/2011

Document Type:	BIENNIAL STATEMENT
Date of Filing:	09/12/2012
Effective Date:	09/01/2012

Document Type: BIENNIAL STATEMENT
Date of Filing: 02/19/2015
Effective Date: 09/01/2014

Document Type: BIENNIAL STATEMENT
Date of Filing: 10/24/2016
Effective Date: 09/01/2016

Document Type: BIENNIAL STATEMENT
Date of Filing: 10/16/2018
Effective Date: 09/01/2018

Document Type: BIENNIAL STATEMENT
Date of Filing: 12/17/2020
Effective Date: 09/01/2020

Document Type: BIENNIAL STATEMENT
Date of Filing: 01/03/2023
Effective Date: 09/01/2022

Above space is blank intentionally.

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

WITNESS my hand and official seal of the Department of State at the City of Albany on March 28, 2023 at 07:05 A.M.

ROBERT J. RODRIGUEZ
Secretary of State

By: Brenda D. Hughes
Executive Deputy Secretary of State

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