

M23000010800

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

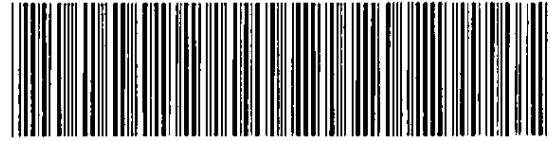
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2023 AUG 17 PM 2:09  
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FBI - NEW YORK

W23-99813

18



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 20, 2023

MURRAY HIDARY  
4475 NAUTILUS DRIVE  
MIAMI BEACH, FL 33140 US

SUBJECT: FLOATING FROG LLC DBA MINDTRAVEL  
Ref. Number: W23000099813

We have received your document for FLOATING FROG LLC DBA MINDTRAVEL and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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

Ariel Jones  
Regulatory Specialist II

Letter Number: 723A00016248

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Floating Frog LLC dba MindTravel  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Murray Hiday

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Name of Person

Floating Frog LLC dba MindTravel

4475 Nautilus Drive

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Address

Miami Beach, FL 33140

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City/State and Zip Code

info@mindtravel.com

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E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Erin Zapcic at (732) 5393282

Name of Contact Person Area Code Daytime Telephone Number

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$125.00 Filing Fee      ☐ \$130.00 Filing Fee & Certificate of Status      ☐ \$155.00 Filing Fee & Certified Copy      ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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. Floating Frog 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. 13-4159752  
(FEI number, if applicable)

4. 2019  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 303 South Broadway  
(Street Address of Principal Office)

Suite 105

Tarrytown, NY 10591

6. 303 South Broadway  
(Mailing Address)

Suite 105

Tarrytown, NY 10591

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

Name: Murray Hidary

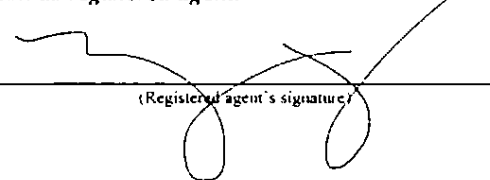
Office Address: 4475 Nautilus Drive

Miami Beach, Florida 33140  
(City) (Zip code)

FILED  
2023 AUG 17 PM 2:09  
SECRETARY OF STATE

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.

  
(Registered agent's signature)

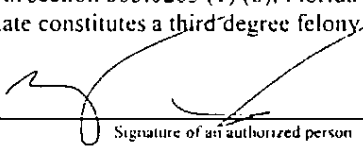
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: Murray Hidary	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: 4475 Nautilus Drive	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	Miami Beach, FL 33140	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
 <input type="checkbox"/> Manager	 Name: _____	 <input type="checkbox"/> Manager	 Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
 <input type="checkbox"/> Manager	 Name: _____	 <input type="checkbox"/> Manager	 Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> 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  
  
 Murray Hidary  
 \_\_\_\_\_  
 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:** FLOATING FROG, LLC  
**DOS ID Number:** 2611666  
**Entity Type:** DOMESTIC LIMITED LIABILITY COMPANY  
**Entity Status:** EXISTING  
**Date of Initial Filing with DOS:** 03/01/2001  
**Statement Status:** CURRENT  
**Statement Due Date:** 03/31/2025

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:** 03/01/2001  
**Entity Name:** FLOATING FROG, LLC

**Document Type:** AFFIDAVIT OF PUBLICATION  
**Date of Filing:** 08/31/2001

**Document Type:** AFFIDAVIT OF PUBLICATION  
**Date of Filing:** 08/31/2001

**Document Type:** BIENNIAL STATEMENT  
**Date of Filing:** 05/13/2003  
**Effective Date:** 03/01/2003

**Document Type:** BIENNIAL STATEMENT  
**Date of Filing:** 03/28/2005  
**Effective Date:** 03/01/2005

**Document Type:** BIENNIAL STATEMENT  
**Date of Filing:** 09/21/2007  
**Effective Date:** 03/01/2007

**Document Type:** BIENNIAL STATEMENT  
**Date of Filing:** 03/02/2009  
**Effective Date:** 03/01/2009

**Document Type:** BIENNIAL STATEMENT  
**Date of Filing:** 06/28/2011  
**Effective Date:** 03/01/2011

**Document Type:** BIENNIAL STATEMENT  
**Date of Filing:** 06/04/2015  
**Effective Date:** 03/01/2015

**Document Type:** BIENNIAL STATEMENT  
**Date of Filing:** 08/08/2023  
**Effective Date:** 03/01/2023

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 August 08, 2023 at  
03:03 P.M.



ROBERT J. RODRIGUEZ, Secretary of State

*Brendan C. Hughes*

By Brendan C. Hughes  
Executive Deputy Secretary of State