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JUN 0 5 2024 K. Brumbley

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

ENTITY NAME <u>258 Th</u>	ird Avenue LLC	**WALK IN*
DOCUMENT NUMBER		
	PLEASE FILE TO	HE ATTACHED AND RETURN
	Plain Copy	
XXXXXXXX	Certified Copy	
	Certificate of Status	
	Certified Copy of Arts	
	• ,• •	& Amendments Complete File (Including Annual Reports)
	Certificate of Status Certificate of Status K	Peffecting:
	ŕ	NOTARIAL CERTIFICATION**
COUNTRY OF DESTINAT NUMBER OF CERTIFICA		
TOTAL OWED \$ 155		ACCOUNT # 120140000108 Little United Corporate Services, Inc. Thank won 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. 258 Third Avenue Ll	LC Limited Liability Company; must include "Limite	al I dishali mi Panisana. W	**		
(Name of Poteign	Elimited Elability Company, must include Elimite	a Elability Company.	Library W. Bec. 7		
(If name unavailable, enter alternate r	name adopted for the purpose of transacting business in F	lorida. The alternate name	must include "Limited Liability Con	npany," "L.E.C." or "LLC."	
2. New York (Jurisdiction under the law of w	chich foreign limited liability company is organized) (FEI number, it		(PEI number, if applie	rable)	
4. 06/07/2024					
	(Date first transacted business in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to determ	registration.) line penalty liability)			
5. 353 East 58th Street Address of Principal Office)	eet, 3rd Floor	6. 353 Ec	ast 58th Street, 3rd Flo	oor	
New York, NY 100	022	New Yo	New York, NY 10022		
				2024 35	
7. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable		- 1	
Name:	United Corporate Services, Inc.			PH 57	
Office Address:	3458 Lakeshore Drive			_;	
	Tallahassee	Fl	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.

Michael A. Barr Pres., United Corporate Services, Inc.

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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name: Hee Nam Bae Name: _____ □Manager □Manager Address: 353 East 58th Street, 3rd Floor Address: _____ [X] Member □Member New York, NY 10022 □ Authorized □ Authorized Person Person Other____ □Other____ □Other Other _____ Name: _____ □Manager □Manager Name: _____ Address: ______ **□**Member ☐ Member Address: ☐ Authorized ☐ Authorized Person Person □Other_____ □Other_____ □Other □Other _ □Manager Name: ______ □Manager Name: _____ ___ Address: ______ ☐ Member Address: □ Member □ 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. Nonindexed 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/ Hee Nam Bae Signature of an authorized person

Hee Nam Bae
Typed or printed name of signee

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I. WALTER T. MOSLEY, 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: 258 THIRD AVENUE LLC

DOS ID Number: 3475654

Entity Type: DOMESTIC LIMITED LIABILITY COMPANY

Entity Status: EXISTING

Date of Initial Filing with DOS: 02/12/2007

Statement Status: CURRENT

Statement Due Date: 02/28/2025

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: 02/12/2007

Entity Name: 258 THIRD AVENUE LLC

Document Type: CERTIFICATE OF PUBLICATION

Date of Filing: 06/06/2007

Document Type: BIENNIAL STATEMENT

 Date of Filing:
 02/03/2009

 Effective Date:
 02/01/2009

Page 1 of 2

Document Type:

BIENNIAL STATEMENT

Date of Filing:

08/19/2014

Effective Date:

02/01/2013

Document Type:

BIENNIAL STATEMENT

Date of Filing:

01/05/2016

Effective Date:

02/01/2015

Document Type:

BIENNIAL STATEMENT

Date of Filing:

02/02/2017

Effective Date:

02/01/2017

Document Type:

BIENNIAL STATEMENT

Date of Filing:

08/09/2023

Effective Date:

02/01/2023

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 June 06, 2024 at 12:21 P.M.

WALTER T. MOSLEY Secretary of State

Brandon C Heyles

BRENDAN C. HUGHES
Executive Deputy Secretary of State

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