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June 6, 2024

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

To whom it may concern:

Please find enclosed the Articles of Organization, New York Certificate of Status, and payment for the Foreign LLC Filing of Channing Cross LLC.

If you have any questions, please contact our office at (904) 829-6383 or email info@oldcitylaw.com.

Thank you,

Anish K. Patel, Esq. Old City Law, PLLC

COVER LETTER

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TO:	Registration Section Division of Corporations			
SUBJE	Channing Cross LLC			
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ne of Limited Liability Company		
The enc Existence	losed "Application by Foreign Limited Liability ce, and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate of e referenced foreign limited liability company to transact business in Florida		
Please r	eturn all correspondence concerning this matter	to the following:		
	Anish Patel			
		Name of Person		
Old City Law, PLLC				
		Firm/Company		
	1 Riberia Street			
		Address		
	St. Augustine, FL 32084			
		City/State and Zip Code		
	anish.patel@oldcitylaw.com			
	E-mail address: (to b	be used for future annual report notification)		
For furt	her information concerning this matter, please ca	all:		
	Anish Patel	904 829-6383		
	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 DE \$125.00 Filing Fee \$130.00 Filing F Certificate	Fee & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certificate		

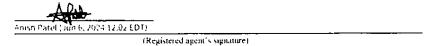
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

-						
name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	orida. The alternat	e name must include "Limited Liab	bility Company,""L.L.C;	'or"LLC	
New York Unisdiction under the law of which foreign limited hability company is organized)			3. (FEI number, (fapplicable)			
	(Date first transacted business in Florida, if prior to r (See sections 605 0904 & 605,0905, F.S. to determine	egistration I				
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	• •) St. George Street	ŧ		
290 St. George Street			(Mailing Address)	· · · · · · · · · · · · · · · · · · ·		
			-			
St. Augustine, FL	32084		Augustine, FL 320			
				2024		
··						
Name and street addres	s of Florida registered agent: (P.O. Box	NOT accep	table)	OI NOT	1	
	<u> </u>			5 T.	7	
	Old City Law, PLLC			PH 3: 이는 ST	: 1	
Name:			_	ું કું કું કું કું કું કું કું કું કું ક		
Office Address:	1 Riberia Street			19 19		
Office Address.	0	_				
	St. Augustine		32084 , Florida			

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.



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: Name: Robert M. Robert ■Manager ■Manager Name: _____ 290 St. George Street ☑ Member ☐Member Address: St. Augustine, FL 32084 ■Authorized ■Authorized Person Person □Other____ □Other_____ Other____ Other_____ Name: __ ■ Manager Name: _____ ■ Member Address: ■Member Address: _____ ■Authorized ■Authorized Person Person Other____ Other___ Other____ Other ___ Name: ____ ■Manager Name: ■Manager Address: _____ Address: _____ □Member ■Member ■Authorized ☐Authorized Person Person 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. Robert Robert (Jun 6, 2024 17:01 EDT) Signature of an authorized person Robert M Robert

Exped or printed name of signee

FL Foreign LLC Filing Docs

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STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, BRENDAN C. HUGHES. Acting 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: CHANNING CROSS LLC

DOS ID Number: 4154155

Entity Type: DOMESTIC LIMITED LIABILITY COMPANY

Entity Status: EXISTING
Date of Initial Filing with DOS: 10/17/2011

Statement Status: PAST DUE
Statement Due Date: 10/31/2021

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 May 22, 2024 at 02:23 P.M.

Brandon C. Hughan

BRENDAN C. HUGHES Acting Secretary of State

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