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Division of Corporations

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Florida Department of State
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Foreign Limited Liability Company
124 RAYMOND AVENUE LLC

Certificate of Status	0
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DIVISION OF STATE

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AUG 23 2024

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

IN COMPLIANCE WITH SECTION 605.092, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. 124 RAYMOND AVENUE 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. (LL number, if applicable)

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

5. 2316 Woodbine Avenue
(Street Address of Principal Office)

Bellmore, NY 11710

6. C O Vincent Owens
(Mailing Address)

2316 Woodbine Avenue

Bellmore, NY 11710

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

Name: Nationwide Registered Agents Corp.

Office Address: 7064 Northwest 49th Street

Lauderhill, Florida 33319
(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.

/s/ Joseph Strauss

(Registered agent's signature)

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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>
☐ Manager	Name: <u>Vincent Owens</u>	☐ Manager	Name: <u>Alan Owens</u>
☒ Member	Address: <u>2316 Woodbine Ave</u>	☒ Member	Address: <u>175 Windsor Avenue</u>
☐ Authorized	<u>Bellmore, NY 11710</u>	☐ Authorized	<u>Rockville Centre, NY 11570</u>
Person	<u></u>	Person	<u></u>
☐ Other	<u></u>	☐ Other	<u></u>
☐ Manager	Name: <u>Kenneth Owens</u>	☐ Manager	Name: <u>Thomas Owens</u>
☒ Member	Address: <u>127 Lee Avenue</u>	☒ Member	Address: <u>45 Seawane Road</u>
☐ Authorized	<u>Rockville Centre, NY 11570</u>	☐ Authorized	<u>East Rockaway, NY 11518</u>
Person	<u></u>	Person	<u></u>
☐ Other	<u></u>	☐ Other	<u></u>
☐ Manager	Name: <u>Gavin Saul</u>	☐ Manager	Name: <u>Thomas Owens, Jr.</u>
☒ Member	Address: <u>2219 SW 45th Ter</u>	☒ Member	Address: <u>30 Mansfield Drive</u>
☐ Authorized	<u>Cape Coral, FL 33914</u>	☐ Authorized	<u>Massapequa Park, NY 11762</u>
Person	<u></u>	Person	<u></u>
☐ Other	<u></u>	☐ Other	<u></u>

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.

/s/ Vincent Owens

Signature of an authorized person

Vincent Owens

Typed or printed name of signer

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ATTACHMENT: ADDITIONAL MEMBERS AND MANAGERS
124 RAYMOND AVENUE LLC

<u>Title or Capacity:</u>	<u>Name and Address:</u>
☐ Manager	Name: Matthew Owens
☒ Member	Address: 3 Seawane Road
☐ Authorized	East Rockaway, NY 11518
Person	
☐ Other	☐ Other

<u>Title or Capacity:</u>	<u>Name and Address:</u>
☐ Manager	Name: James Lehr
☒ Member	Address: 344 Barnet Avenue
☐ Authorized	Totowa, NJ 07512
Person	
☐ Other	☐ Other

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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:	124 RAYMOND AVENUE LLC
DOS ID Number:	7333580
Entity Type:	DOMESTIC LIMITED LIABILITY COMPANY
Entity Status:	EXISTING
Date of Initial Filing with DOS:	05/21/2024
Statement Status:	CURRENT
Statement Due Date:	05/31/2026

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 22, 2024 at 11:40 A.M.

WALTER T. MOSLEY
Secretary of State

BRENDAN C. HUGHES
Executive Deputy Secretary of State

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