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2019 AUG -7 PM 3:53

AUG 15 2019  
M. SOLOMON

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ABRAHAM J FISHER LLC  
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:

ANN ISHENKO  
Name of Person  
ABRAHAM J FISHER LLC  
Firm/Company  
5115 UPSON AVENUE  
Address  
DE LEON SPRINGS, FL 32130  
City/State and Zip Code  
AISHENKO@BSTSTRATEGIES.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANN ISHENKO at (201) 400-4211  
Name of Contact Person Area Code Daytime Telephone Number

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

**STREET ADDRESS:**  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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. ABRAHAM J FISHER 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. 82-0924346
(FEI 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. 4414 N US HIGHWAY 17
(Street Address of Principal Office)

6. PO BOX 1102
(Mailing Address)

DELAND, FLORIDA 32720

DE LEON SPRINGS, FLORIDA 32130

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

Name: BER ABRAHAM J FISHER

Office Address: 4414 N US HIGHWAY 17

DELAND, Florida 32720
(City) (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.

[Handwritten Signature]
(Registered agent's signature)

8/1/19

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:**

Manager Name: BER ABRAHAM J FISHER

Member Address: 4414 N US HIGHWAY 17

Authorized DELAND FLORIDA 32720

Person \_\_\_\_\_

Other \_\_\_\_\_  Other \_\_\_\_\_

Manager Name: ANN ISHENKO

Member Address: PO BOX 1102

Authorized DE LEON SPRINGS, FL 32130

Person \_\_\_\_\_

Other \_\_\_\_\_  Other \_\_\_\_\_

Manager Name: CHAYA J FISHER

Member Address: 4414 N US HIGHWAY 17

Authorized DELAND, FLORIDA 32720

Person \_\_\_\_\_

Other \_\_\_\_\_  Other \_\_\_\_\_

**Title or Capacity:** **Name and Address:**

Manager Name: \_\_\_\_\_

Member Address: \_\_\_\_\_

Authorized \_\_\_\_\_

Person \_\_\_\_\_

Other \_\_\_\_\_  Other \_\_\_\_\_

Manager Name: \_\_\_\_\_

Member Address: \_\_\_\_\_

Authorized \_\_\_\_\_

Person \_\_\_\_\_

Other \_\_\_\_\_  Other \_\_\_\_\_

Manager Name: \_\_\_\_\_

Member Address: \_\_\_\_\_

Authorized \_\_\_\_\_

Person \_\_\_\_\_

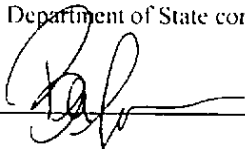
Other \_\_\_\_\_  Other \_\_\_\_\_

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**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

8/1/19

BER ABRAHAM J FISHER, MEMBER  
Typed or printed name of signee

**State of New York  
Department of State } ss:**

I hereby certify, that ABRAHAM J FISHER LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 03/24/2017, and that the Limited Liability Company is existing so far as shown by the records of the Department.

The Biennial Statement is past due.



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*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 23rd day of July two  
thousand and nineteen.*

*Brendan C. Hughes*

*Brendan C Hughes  
Executive Deputy Secretary of State*

8/1/2019

BST STRATEGIES INC Mail - NYS DOS Corporations Ebiennial Filing Acknowledgment : 190731060032



Bracha Ann Ishenko <aishenko@bststrategies.com>

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**NYS DOS Corporations Ebiennial Filing Acknowledgment : 190731060032**

1 message

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**NYS DOS Corporations Ebiennial** <Corporations@dos.ny.gov>  
To: AISHENKO@bststrategies.com

Wed, Jul 31, 2019 at 9:36 PM

**New York State Department of State  
Division of Corporations**

PLEASE PRINT THIS E-MAIL FOR YOUR RECORDS

Thank you for submitting the biennial statement for your business entity through the e-Statement Filing System. The biennial statement has been filed with the Department of State.

Attached is a copy of the filed biennial statement for the following business entity:

DOS ID: 5108175  
BUSINESS NAME: ABRAHAM J FISHER LLC  
Filing date: 07/31/2019 ✓ PAID  
Next Filing Period: 03/2021  
E-mail Address: AISHENKO@BSTSTRATEGIES.COM

The Department of State recommends that you retain this filing acknowledgment and attachment for your records. The Department of State will send an email reminder notice when the next biennial statement for your business entity is due. The notice will be sent to the email address indicated above.

To update your email address, please go to the Department of State's Biennial Statement Email Address Notification website at [www.email.ebiennial.dos.ny.gov](http://www.email.ebiennial.dos.ny.gov).

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190731060032.pdf (attached)  
24K

\* THE GOOD STANDING  
LETTER SAYS PAID DUE  
BIENNIAL REPORT -  
PAID TODAY ✓

# Biennial Statement

NYS Department of State  
Division of Corporations, State Records &  
Uniform Commercial Code  
<http://www.dos.ny.gov>

**BUSINESS NAME:** ABRAHAM J FISHER LLC

**FILING PERIOD:** 03/2019

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## Part 1 - Service of Process Address (Address must be within the United States or its territories)

Name <b>BER A. FISHER</b>		
Address Line 1 <b>4414 N US HIGHWAY 17</b>		
Address Line 2		
City <b>DELAND</b>	State <b>FL</b>	Zip Code <b>32720</b>

## Signer Information

I affirm that the statements contained herein are true to the best of my knowledge, that I am authorized to sign this Biennial Statement and that my signature typed below constitutes my electronic signature.

Electronic Signature <b>BER A FISHER</b>
Capacity of Signer <b>MEMBER</b>

**FILED WITH THE NYS DEPARTMENT OF STATE ON: 07/31/2019**

**FILING NUMBER: 190731060032 - 5108175**