

M21000005495

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP

WAIT

MAIL

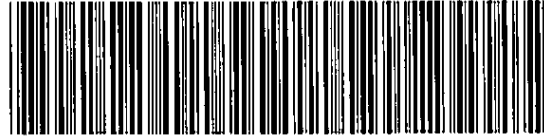
(Business Entity Name)

(Document Number)

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2021 MAY -7 PM 12:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAY 07 2021  
12:31:01 PM

APPROVED  
AND  
FILED  
2021 MAY -7 AM 9:38

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Shipkevich PLLC  
\_\_\_\_\_  
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:

Krystina Endara  
\_\_\_\_\_  
Name of Person

Shipkevich PLLC  
\_\_\_\_\_  
Firm/Company

465 Brickell Ave, Unit 3705  
\_\_\_\_\_  
Address

Miami, FL 33131  
\_\_\_\_\_  
City/State and Zip Code

Kendara@shipkevich.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Krystina Endara	305	202-2510
_____	at (_____)	_____
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**

- |   |   |  |   |
|---|---|--|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$160.00 Filing Fee, Certificate<br>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. Shipkevich PLLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Shipkevich PLLC, 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. \_\_\_\_\_  
(FEI number, if applicable)

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

5. 165 BROADWAY, SUITE 2300  
(Street Address of Principal Office)

6. 601 BRICKELL KEY DRIVE, SUITE 700  
(Mailing Address)

NEW YORK, NEW YORK, 10006

MIAMI, FL 33131

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

Name: Krystina Endara

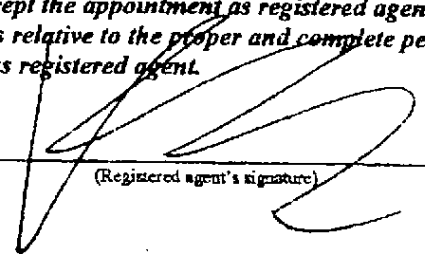
Office Address: 465 Brickell Ave, Unit 3705

Miami, Florida 33131  
(City) (Zip code)

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FILED

**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]:

Title or Capacity:                      Name and Address:  
 Manager              Name: Felix Shipkevich  
 Member              Address: 165 BROADWAY, STE. 2300  
 Authorized              NEW YORK, NEW YORK, 10006  
Person  
 Other <sup>Principal</sup>               Other

Title or Capacity:                      Name and Address:  
 Manager              Name: Krystina Endara  
 Member              Address: 600 BRICKELL KEY DR., 700  
 Authorized              MIAMI, FL 33131  
Person  
 Other                                       Other

Manager              Name: \_\_\_\_\_  
 Member              Address: \_\_\_\_\_  
 Authorized  
Person  
 Other                                       Other

Manager              Name: \_\_\_\_\_  
 Member              Address: \_\_\_\_\_  
 Authorized  
Person  
 Other                                       Other

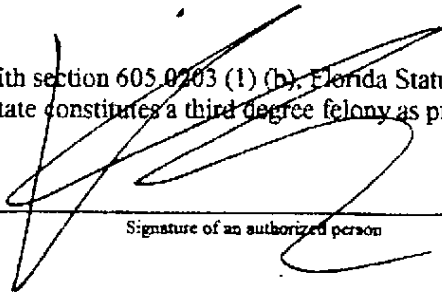
Manager              Name: \_\_\_\_\_  
 Member              Address: \_\_\_\_\_  
 Authorized  
Person  
 Other                                       Other

Manager              Name: \_\_\_\_\_  
 Member              Address: \_\_\_\_\_  
 Authorized  
Person  
 Other                                       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  
Krystina Endara  
\_\_\_\_\_  
Typed or printed name of signee

State of New York  
Department of State } ss:

I hereby certify, that THE SHIPKEVICH LAW FIRM a NEW YORK Professional Service Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 09/06/2005, and that Professional Service Limited Liability Company is existing so far as shown by the records of the Department.

A Certificate of Amendment THE SHIPKEVICH LAW FIRM, changing its name to THE SHIPKEVICH LAW FIRM, PLLC, was filed 08/07/2006.

A Certificate of Amendment THE SHIPKEVICH LAW FIRM, PLLC, changing its name to SHIPKEVICH PLLC, was filed 03/16/2012.

The Biennial Statement is past due.



\*\*\*

*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 30th day of April, two  
thousand and twenty-one.*

*Brendan C. Hughes*

Brendan C Hughes