

M23000001966

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

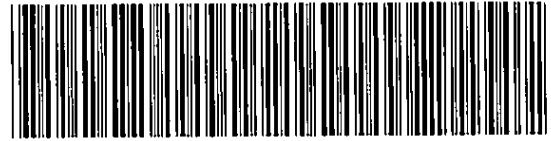
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2023 FEB - 6 PM 2:50

DIRECTOR'S OFFICE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2023 FEB - 6 PM 2:50

RECEIVED

6 FEB 7 2023

FEB 07 2023

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com

incserv[®]

ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE 2/6/2023

PRIORITY Regular Approval

OUR REF # (Order ID#) 1117914

ORDER ENTITY

BASKETBALL CITY NEW YORK LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

BASKETBALL CITY NEW YORK LLC (FL)

File the attached foreign qualification document and provide a certificate of status.

NOTES:

\$130.00 Authorized
Email address for annual report reminders: filings@accumera.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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. Basketball City New York 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. _____
(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. 17645 Ashbourne Way, Unit A
(Street Address of Principal Office)
Boca Raton, FL 33496

6. 17645 Ashbourne Way, Unit A
(Mailing Address)
Boca Raton, FL 33496

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

Name: Incorporating Services, Ltd.

Office Address: 1540 Glenway Drive
Tallahassee, Florida 32301
(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.

Melissa A. Mason
(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: Manager
Name and Address: Name: Bruce Radler
 Address: 17645 Ashbourne Way
 Unit A
 Boca Raton, FL 33496
 Other _____ Other _____

Title or Capacity: Manager
Name and Address: Name: Basketball Holding, LLC
 Address: Pier 36 at 299 South Street
 New York, NY 10002
 Member
 Authorized
 Person
 Other _____ Other _____

Manager
Name and Address: Name: Gould Basketball NY City LLC
 Address: 60 Cutter Mill Road
 Suite 303
 Great Neck, NY 11021
 Member
 Authorized
 Person
 Other _____ Other _____

Manager
 Name: _____
 Member
 Address: _____
 Authorized
 Person
 Other _____ Other _____

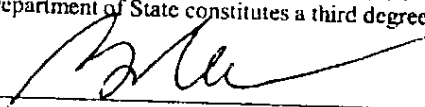
Manager
 Name: _____
 Member
 Address: _____
 Authorized
 Person
 Other _____ Other _____

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

Bruce Radler

 Typed or printed name of signer

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ, 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: BASKETBALL CITY NEW YORK LLC
DOS ID Number: 1967078
Entity Type: DOMESTIC LIMITED LIABILITY COMPANY
Entity Status: EXISTING
Date of Initial Filing with DOS: 10/23/1995
Statement Status: CURRENT
Statement Due Date: 10/31/2023

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: 10/23/1995
Entity Name: BASKETBALL CITY NEW YORK LLC

Document Type: AFFIDAVIT OF PUBLICATION
Date of Filing: 05/06/1996

Document Type: AFFIDAVIT OF PUBLICATION
Date of Filing: 05/06/1996

Document Type: CERTIFICATE OF AMENDMENT
Date of Filing: 09/17/2001

10/31/2023

Document Type: BIENNIAL STATEMENT
Date of Filing: 12/28/2001
Effective Date: 10/01/2001

Document Type: BIENNIAL STATEMENT
Date of Filing: 02/02/2004
Effective Date: 10/01/2003

Document Type: BIENNIAL STATEMENT
Date of Filing: 02/03/2010
Effective Date: 10/01/2009

Document Type: BIENNIAL STATEMENT
Date of Filing: 02/05/2013
Effective Date: 10/01/2011

Document Type: BIENNIAL STATEMENT
Date of Filing: 11/05/2013
Effective Date: 10/01/2013

Document Type: CERTIFICATE OF AMENDMENT
Date of Filing: 03/19/2015

Document Type: BIENNIAL STATEMENT
Date of Filing: 10/04/2017
Effective Date: 10/01/2017

Document Type: BIENNIAL STATEMENT
Date of Filing: 10/10/2019
Effective Date: 10/01/2019

Document Type: BIENNIAL STATEMENT
Date of Filing: 08/01/2022
Effective Date: 10/01/2021

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2/2/23
10:58
A.M.

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 February 02, 2023 at 10:58 A.M.



ROBERT J. RODRIGUEZ, Secretary of State

Brendan C. Hughes

By Brendan C. Hughes
Executive Deputy Secretary of State

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Division of Corporation's Document Authentication Website at <http://ecorp.dos.ny.gov>