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09 AUG 28 AM 8:21

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
8/11

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: CENTIN INVESTMENTS, INC.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

CRAIG T. GALLE

Name of Person

CHAPMAN & GALLE, PLC

Firm/Company

13501 SOUTH SHORE BLVD. #103

Address

WELLINGTON, FLORIDA 33414

City/State and Zip code

POLOLAWYER@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CRAIG T. GALLE at (561) 798-1708

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

PLEASE *RUSH* & *FedEx* in the enclosed envelope. *Thank You*

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. CENTIN INVESTMENTS INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE

(State or country under the law of which it is incorporated)

3. _____

(FEI number, if applicable)

4. JAN 29, 2009

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. NOT PRIOR TO REGISTRATION

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2711 CENTERVILLE ROAD, SUITE 400, WILMINGTON DE 19808

(Principal office address)

c/o MARIO GAZZOLA, 600 MADISON AVENUE, #12 FLOOR, NY, NY 10022

(Current mailing address)

8. OWN PROPERTY

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name:

CRAIG T. GALLE

Office Address:

13501 SOUTH SHORE BLVD., #103

WELLINGTON

(City)

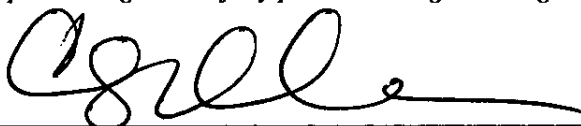
, Florida

33414

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: EUGENIO SNICHELOTTO

Address: C/O PAVIA & HARCOURT, 600 MADISON AVENUE, 12TH FLOOR,
NEW YORK, NEW YORK 10022

Director: _____

Address: _____

B. OFFICERS

President: EUGENIO SNICHELOTTO

Address: C/O PAVIA & HARCOURT, 600 MADISON AVENUE, 12TH FLOOR
NEW YORK, NEW YORK 10022

Vice President: MARIO GAZZOLA

Address: PAVIA & HARCOURT, 600 MADISON AVENUE, 12TH FLOOR,
NEW YORK, NEW YORK 10022

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. _____

EUGENIO SNICHELOTTO

MARIO GAZZOLA

(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CENTIN INVESTMENTS INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF AUGUST, A.D. 2009.

FILED
09 AUG 28 AM 8:21
TALLAHASSEE FLORIDA
SECRETARY OF STATE

4649837 8300

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Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7494723

DATE: 08-26-09