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Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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FOREIGN PROFIT/NONPROFIT CORPORATION

Lovsta International Inc.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

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T. Burch AUG 27 2012

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.

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1. Lovsta International 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. 45-3992127

(FEI number, if applicable)

4. 12/05/2011

(Date of incorporation)

5. Perpetual

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

6. 01/01/2012

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. c/o Axel Johnson Inc., 155 Spring Street, 6th Floor, New York, NY 10012

(Principal office address)

c/o Axel Johnson Inc., 155 Spring Street, 6th Floor, New York, NY 10012

(Current mailing address)

8. Holding Company

(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation

(City)

Florida 33324

(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.

C T Corporation System

By:

Connie Bryan
(Registered agent's signature)

Connie Bryan
Assistant Secretary

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.

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

A. DIRECTORS

Chairman: Michael D. Milligan

Address: c/o Axel Johnson Inc., 155 Spring Street, 6th Floor, New York, NY 10012

Vice Chairman: _____

Address: _____

Director: Sally A. Sarsfield

Address: c/o Axel Johnson Inc., 155 Spring Street, 6th Floor, New York, NY 10012

Director: John C. Pascale

Address: c/o Axel Johnson Inc., 1 Landmark Square, Suite 407, Stamford, CT 06901

B. OFFICERS

President: Michael D. Milligan

Address: c/o Axel Johnson Inc., 155 Spring Street, 6th Floor, New York, NY 10012

Vice President: John C. Pascale

Address: c/o Axel Johnson Inc., 1 Landmark Square, Suite 407, Stamford, CT 06901

Secretary: Tammany A. Patrick

Address: c/o Axel Johnson Inc., 155 Spring Street, 6th Floor, New York, NY 10012

Treasurer: Sally A. Sarsfield

Address: c/o Axel Johnson Inc., 155 Spring Street, 6th Floor, New York, NY 10012

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

13. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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.

14. Tammany A. Patrick, Secretary

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

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TALLAHASSEE, FLORIDA

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA

ADDENDUM Item 12. B.
Lovsta International Inc.

Officers

Chief Executive Officer	Michael D. Milligan
Vice President	Sally A. Sarsfield
Vice President	Timothy P. Grier
Vice President	Sophie Antonia Mörner

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LOVSTA INTERNATIONAL 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-FIRST DAY OF AUGUST, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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TALLAHASSEE, FLORIDA



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Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9795469

DATE: 08-21-12