

F12000004478

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

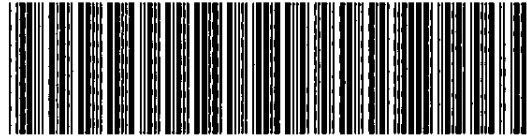
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/12/12--01011--007 **78.75

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12 NOV -1 PM 2:31
SECRETARY OF STATE
TALLAHASSEE FLORIDA

68925-2127



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 15, 2012

GINA MAZZOCCHI
2982 BELLWIND CIRCLE
ROCKLEDGE, FL 32955

SUBJECT: OPTISTENT, INC.
Ref. Number: W12000052684

We have received your document for OPTISTENT, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Justin M Shivers
Regulatory Specialist II
New Filing Section

Letter Number: 912A00025337

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: OptiSTENT, 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," or "Certificate of Good Standing" 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:

Gina Mazzocchi

Name of Person

OptiSTENT, Inc.

Firm/Company

2982 Bellwind Circle

Address

Rockledge, Florida 32955

City/State and Zip code

gina@elenza.com

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

For further information concerning this matter, please call:

Rudy Mazzocchi

at (321) 229-2014

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

October 31, 2012

To whom it may concern,

I am the Secretary for OptiSTENT, Inc. and I am trying to register OptiSTENT, Inc. as a foreign corporation doing business in Florida. In September, I submitted all necessary documents to the Florida Department of State and paid \$78.75.

I recently received a letter from the Florida Department of State stating that the name of our corporation is not available in Florida.

I need to inform the Florida Department of State that I recently dissolved "OptiSTENT, Inc." a Florida Corporation on September 13, 2012 - Doc No. P12000044155. A copy of the email confirmation of dissolution from the Division of Corporations is enclosed.

Neither I nor any other Director of the company will be reinstating this corporation at any time; therefore the name should be available for use as a foreign corporation.

If there are any questions, please contact me at 321.525.9926 or email at www.gina@elenza.com

Thank you for your assistance in this matter.

Gina Mazzocchi

Gina Mazzocchi
Secretary/Treasurer
OptiSTENT, Inc.

12 NOV - 1 PM 2:32
SECRETARY OF STATE
DIVISION OF CORPORATIONS
FLORIDA

FILED

**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. OptiSTENT, 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 3. 45-5231026
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 05/03/2012 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 2982 Bellwind Circle, Rockledge, FL 32955
(Principal office address)
2982 Bellwind Circle, Rockledge, FL 32955
(Current mailing address)

8. Research & Development
(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: Gina Mazzocchi

Office Address: 2982 Bellwind Circle
Rockledge, Florida 32955
(City) (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.

Gina Mazzocchi
(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

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

A. DIRECTORS

Chairman: Rudy Mazzocchi

Address: 2982 Bellwind Circle
Rockledge, FL 32955

Vice Chairman: _____

Address: _____

Director: Jeff Franco

Address: 300 E. Lombard Street, #840
Baltimore, MD 21202

Director: _____

Address: _____

B. OFFICERS

President: Michael Calhoun

Address: 2700 NE 24th Street
Lighthouse Point, FL 33064

Vice President: _____

Address: _____

Secretary: Gina Mazzocchi

Address: 2982 Bellwind Circle, Rockledge, FL 32955

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

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. Rudy Mazzocchi, Chairman

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

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SECRETARY OF STATE
ALLAHABAD, FLORIDA

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OPTISTENT, 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-EIGHTH DAY OF SEPTEMBER, A.D. 2012.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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121048004

You may verify this certificate online
at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9880905

DATE: 09-28-12