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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VH

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: CERTAINRATE GROUP 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:

JOHN F. WOLLE
Name of Person

CERTAINRATE GROUP INC
Firm/Company

1130 SUGAR SANDS BLVD UNIT 193
Address

RIVIERA BEACH FL 33404
City/State and Zip code

JOHNSY FREEDOM @ GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN WOLLE at (561) 254 0533
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

**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. GERTAINRATE GROUP 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. NYS 3. 46-3586083
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 07/15/2013 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 8/15/2014
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5 LEDYARD AVE, CAZENOVIA NY 13035
(Principal office address)

PO BOX 39, CAZENOVIA NY 13035
(Current mailing address)

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

Name: JOHN F. WOLFE

Office Address: 1130 SUGAR SANDS BLVD UNIT 193
RIVIERA BEACH, Florida 33404
(City) (Zip code)

9. 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.

John Wolfe
(Registered agent's signature)

10. 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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TALLAHASSEE, FLORIDA

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

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A. DIRECTORS

Chairman: JAMES P. GRIFFIN

Address: 5 LEDYARD AVE
CAZENOVIA NY 13035

SECRETARY OF STATE
TALLAHASSEE FLORIDA

Vice Chairman: _____

Address: _____

Director: JOHN F. WOLLE

Address: 1130 SUGAR SANDS BLVD UNIT 193
RIVIERA BEACH FL 33404

Director: _____

Address: _____

B. OFFICERS

President: JAMES P. GRIFFIN

Address: 5 LEDYARD AVE
CAZENOVIA NY 13035

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: JOHN F. WOLLE

Address: 1130 SUGAR SANDS BLVD UNIT 193 RIVIERA BEACH FL
33404

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

12. _____

John F. Wolle, Treas

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.

13. JOHN F. WOLLE TREASURER

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

APPROVED
AND
FILED

**State of New York
Department of State** } ss:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I hereby certify, that the Certificate of Incorporation of CERTAINRATE GROUP INC. was filed on 07/15/2013, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 24th day of July two
thousand and fourteen.*

Anthony Scardino

Executive Deputy Secretary of State