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W16-54594

(Requestor's Name)

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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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W16-54594

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2016 AUG 22 A 11: 24

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AUG 23 2015
BRICE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 8, 2016

MAHENDRA AGRAWAL
3 EMPIRE BLVD.
SOUTH HACKENSACK, NJ 07606

SUBJECT: SONDR A ROBERTS INC,
Ref. Number: W16000054594

We have received your document for SONDR A ROBERTS INC, and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 416A00016603

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STATE DEPARTMENT OF
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SONDRA ROBERTS 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:

MAHENDRA AGRAWAL
Name of Person

SONDRA ROBERTS INC.
Firm/Company

3 EMPIRE BLVD.
Address

SOUTH HACKENSACK, NJ 07606
City/State and Zip code

MAHENDRA.AGRAWAL@CAPELLI NEWYORK.COM
E-mail address: (to be used for future annual report notification)

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2015 AUG 22 AM 11:24
STATE OF FLORIDA
TALLAHASSEE

For further information concerning this matter, please call:

MAHENDRA AGRAWAL at (201) 641-2700 ext 333
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration 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. SONDRA ROBERTS 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. NEW JERSEY 3. 81-2876066
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 05/18/2016 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. 08/05/2016
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 3 EMPIRE BLVD., SOUTH HACKENSACK, NJ 07606
(Principal office address)

(Current mailing address, if different)

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


Name: ROBERT CAMCHE

Office Address: 1730 Corporate Drive
BOYNTON BEACH, Florida 33426
(City) (Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.


(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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: GEORGE ALTIRS

Address: 113E SADDLE RIVER ROAD

SADDLE RIVER, NJ 07458

Director: MASOUD ALTIRS

Address: 219E SADDLE RIVER ROAD

SADDLE RIVER, NJ 07458

B. OFFICERS

President: GEORGE ALTIRS

Address: 113E Saddle River Road,

Saddle River, NJ 07458

Vice President: MASOUD ALTIRS

Address: 219E Saddle River Road

Saddle River, NJ 07458

Secretary: _____

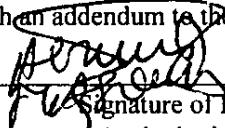
Address: _____

Treasurer: _____

Address: _____

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

12. _____



Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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. MASOUD ALTIRS, Vice President.

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

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2018 AUG 22 A 11:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

SONDRA ROBERTS INC.
0101041067

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on May 18, 2016.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

MASOUD ALTIRS
3 EMPIRE BLVD
SOUTH HACKENSACK, NJ 07606



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 17th day of August, 2016

Ford M. Scudder

Ford M. Scudder
Acting State Treasurer

Certificate Number : 6073644886

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp