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HARRIS

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 909492 7165233
AUTHORIZATION Spells Classical
COST LIMIT : \$ 70.00
ORDER DATE: November 13, 2017
ORDER TIME : 4:24 PM
ORDER NO. : 909492-005
CUSTOMER NO: 7165233
FOREIGN FILINGS
NAME: FORM-ON USA CORP
XXXX QUALIFICATION (TYPE: CO)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Roxanne Turner EXT#
EXAMINER:

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. Form-on USA C (Enter name of co	rporation; must include "INCORPORATED."	"COMPANY," "CORPORATION,	· · · · · · · · · · · · · · · · · · ·		
"Inc.," "Co.," "Co	orp." "Inc," "Co," or "Corp.")				
(If name unavaila	ble in Florida, enter alternate corporate name a	dopted for the purpose of transacting	business in Florida)		
2. Delaware	3.				
(State or country	y under the law of which it is incorporated)	(FEI number, if app	(FEI number, if applicable)		
4. November 6, 20	17 5.				
4. November 6, 2017 5		(Date of duration, if other t	(Date of duration, if other than perpetual)		
6.					
	(Date first transacted business in				
	(SEE SECTIONS 607.1501 & 607.15	02, F.S., to determine penalty habilit	y)		
7. 1001 NW 12th Te	rrace, Pompano Beach, FL 33069				
	(Princip	al office address)			
	(Current mailin	g address, if different)			
			20		
8. Name and stree	t address of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	_ = = = = = = = = = = = = = = = = = = =		
Name:	Corporation Service Company		2017 KGV 13		
Name.	1201 Hays Street		$=$ $\frac{1}{2}$ \overline{a} :		
Office Address:	1201 Mays officer				
	Tallahassee	32301 , Florida	<u>.</u>		
	(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.

Corporation-Service Company

By: (Registered agent's signature)

(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: Michael Fuller			
Address: 1001 NW 12th Terrace, Pompano Beach, FL 33069	<u></u>		
Vice Chairman:			
Address:			
Director:			_
Address:			
Director:			
Address:			
			- .
B. OFFICERS			
President: Michael Fuller			
Address: 1001 NW 12th Terrace, Pompano Beach, FL 33069			
Vice President:	3.5	2617	
Address:	3 · :: 		<u>:</u>
	, ' , • • • • • • • • • • • • • • • • • • •	<u>c</u> s	•
Secretary: Markus Weiss	··.	<u> </u>	<u>.</u>
Address: 214 Gates Road, Little Ferry, NJ 07643		9:	
Treasurer: Michael Fuller			
Address: 1001 NW 12th Terrace, Pompano Beach, FL 33069			
NOTE: If necessary, you may attach an addendum to the application listing additional o	officers and/or direct	tors.	
12. Make Bull			
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. Michael Fuller, Chief Executive Officer, President and Treasurer



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "FORM-ON USA CORP." 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 THIRTEENTH DAY OF NOVEMBER, A.D.

2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FORM-ON USA CORP." WAS INCORPORATED ON THE SIXTH DAY OF NOVEMBER, A.D. 2017.

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

THE STATE OF THE S

Authentication: 203560104

Date: 11-13-17