

FB000000S164

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

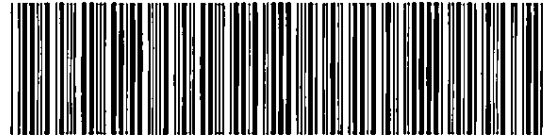
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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NOV 13 PM 5:57

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

11/14/13 DS

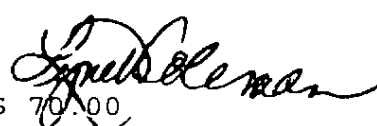
CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 481724 7357072

AUTHORIZATION :

COST LIMIT : \$ 70.00



ORDER DATE : November 13, 2018

ORDER TIME : 11:44 AM

ORDER NO. : 481724-010

CUSTOMER NO: 7357072

FOREIGN FILINGS

NAME: FABBRI BOOTS DISTRIBUTION INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER: _____

FILED
NOV 13 2018
FBI - TAMPA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FABBRI BOOTS DISTRIBUTION 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 Piazza
Name of Person

Tarter Krinsky & Drogin LLP
Firm/Company

1350 Broadway, 11th Floor
Address

New York, NY 10018
City/State and Zip code

gpiazza@tarterkrinsky.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gina Piazza at (212) 216-1129
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.*

FABBRI BOOTS DISTRIBUTION INC.

1. _____
(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 York 3. 38-3916581
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/09/2013 5. _____
(Date of incorporation) (Date of duration, if other than 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. 5511 N. University Dr., Suite 101, Coral Springs, FL 33067
(Principal office address)

(Current mailing address, if different)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(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: _____

Emily Croft
(Registered agent's signature)

Emily Croft
Asst. Vice President

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: Director - Luca Proscia

Address: 5511 N. University Dr., Suite 101, Coral Springs, FL 33067

Vice Chairman: _____

Address: _____

✓ Director: Francesco Valentini

Address: 5511 N. University Dr., Suite 101, Coral Springs, FL 33067

✓ Director: Katia Giannotti

Address: 5511 N. University Dr., Suite 101, Coral Springs, FL 33067

B. OFFICERS

✓ President: Francesco Valentini

Address: 5511 N. University Dr., Suite 101, Coral Springs, FL 33067

✓ Vice President: Luca Proscia

Address: 5511 N. University Dr., Suite 101, Coral Springs, FL 33067

✓ Secretary: Katia Giannotti

Address: 5511 N. University Dr., Suite 101, Coral Springs, FL 33067

✓ Treasurer: Luca Proscia

Address: 5511 N. University Dr., Suite 101, Coral Springs, FL 33067

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. Luca Proscia - Director, Vice-President and Treasurer

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

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

I hereby certify, that the Certificate of Incorporation of FABER! BOOTS DISTRIBUTION INC. was filed on 10/09/2013, 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.

The Biennial Statement is past due.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 09th day of November
two thousand and eighteen.*

Brendan W. Fitzgerald
Executive Deputy Secretary of State