# F21000014995

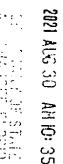
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
2000					

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AUG 3 1 2021 M. SOLOMON

### **COVER LETTER**

	stration Section sion of Corpora					
SUBJECT:	G&G Fitness I	equipment Inc				
OCDUZET.		Name of corporation	n - musi	include suffix		
Dear Sir or M	ładam:					
"Certificate of	of Existence," c	by Foreign Corporation for "Certificate of Good Starporation to transact busing	nding" a	and check are subm	Business in Florida." itted to register the	
Please return	all correspond	ence concerning this matte	er to the	following:		
Darlene Straus	ss					
***		Name o	f Person			
G&G Fitness	Equipment Inc					
		Firm/Co	mpany			
7350 Transit F	Road					
		Add	ress			
Williamsville.	NY 14221					
		City/State	and Zip	code		
dstrauss@live						
	t	-mail address: (to be used	for futu	re annual report no	dification)	
For further in	nformation con	eerning this matter, please	call:			
Darlene Strau	irlene Strauss 716 553.			-2494 cell  Daytime Telephone Number		
Nan	ne of Person	Area Co	de	Daytime Telepho	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	heck payable to:	ollowing amount: FLORIDA DEPARTMEN \$78.75 Filing Fee & Certificate of Status	☐ \$78.7	FATE 75 Filing Fee & ified 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.

inc., Co., Co	οιρ," "Inc." "Co." or "Corp.")			
	able in Florida, enter alternate corporate name ado	opted for the purpose of transacting bu	siness in Florida)	
New York	3. 16	5-1365573		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)		
1/9/1990	5.	··		
(Date	of incorporation)	(Date of duration, if other than perpetual)		
7/27/2021				
7350 T it B	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502			
7350 Transit Road	MILITARISALITE, 102 14791			
	(Principal office	street address)	•	
	(Current mailing a	ddress, if different)	10	
Name and street	et address of Florida registered agent: (P.O. E	Box NOT acceptable)	2.77 3-3.	
Name:	Incorp Services, Inc.	_		
Office Address:	17888 67th Court North	_	# S S S S S S S S S S S S S S S S S S S	
	Loxahatchee	, Florida 33470		
	(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.

Yara Alfaro-Sullivan on behalf of InCorp Services, Inc.

(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.

A. DIRECTORS					
□Chairman	Gordon Gronkowski Name:	□Chairman	Name:		
□Vice Chairman	Address: 1415 New Road	□Vice Chairman			
□Director	Amherst, NY 14226	□Director			-
President	1-1-11-10 to 1	□President			
□Vice President	***************************************	□Vice President			
□Secretary	□Treasurer	☐ Secretary		□Treasurer	
□Other	Other	Other		Other	
□Chairman	Name:66 San Fernando Ln				
Director	E Amherst, NY 14051	Director			
□President		□President			
□Vice President		□Vice President			
□Secretary	□Treasurer	□Sccretary		□Treasurer	
Controlle	Other	□Other		Other 3	
□Chairman	Name:	□Chairman	Name:	30 AM 10: 38	
Director	Address.	Director	71001 Cap	<del>्टा ४</del>	•
□President		□President			
□Vice President		□Vice President			_
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer	
□Other	□ Other	□Other		⊡Other	
	Use an attachment to report more than six (6). The at added to the index when filing your Florida Department of Director		eport form.		
The officer or directly she is aware that fas.817.155, F.S.	ctor signing this document (and who is listed in numbalse information submitted in a document to the Depa	per 11 above) affirms the firtment of State constitu	oat the facts stat ites a third degr	ted herein are true and that he or ree felony as provided for in	
Darlene Stra	auss - Controller				

# State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of G & G FITNESS EQUIPMENT INC. was filed on 01/09/1990, 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 27th day of May two thousand and twenty-one.

Bradan C Hydra

Brendan C Hughes Executive Deputy Secretary of State



August 19, 2021

DARLENE STRAUSS G & G FITNESS EQUIPMENT INC. 7350 TRANSIT ROAD WILLIAMSVILLE, NY 14221

SUBJECT: G & G FITNESS EQUIPMENT INC.

Ref. Number: W21000114575

We have received your document for G & G FITNESS EQUIPMENT INC. and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon Senior Section Administrator

Corrected 8/24/21

AU3 0.0 2021

Letter Number: 721A00019903