# F15000000447

| (Re                                     | equestor's Name)  |              |  |  |  |  |  |
|---|-------------------|--------------|--|--|--|--|--|
| (Ac                                     | idress)           | <del>.</del> |  |  |  |  |  |
| (Ac                                     | idress)           |              |  |  |  |  |  |
| (Ci                                     | ty/State/Zip/Phon | e #)         |  |  |  |  |  |
| PICK-UP                                 | ☐ WAIT            | MAIL         |  |  |  |  |  |
| (Ви                                     | usiness Entity Na | me)          |  |  |  |  |  |
| (Document Number)                       |                   |              |  |  |  |  |  |
| Certified Copies                        | _ Certificate     | s of Status  |  |  |  |  |  |
| Special Instructions to Filing Officer: |                   |              |  |  |  |  |  |
|   |                   |              |  |  |  |  |  |
|   |                   |              |  |  |  |  |  |
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FILED
SECRETARY OF STAIL
DIVISION OF CORPORATIONS

2 00/05/15

#### **COVER LETTER**

| TO: New Filing Section Division of Corporations  |   |  |  |  |
|--|---|--|--|--|
| SUBJECT: STAHL HUNTER LATAM BUYING GROUP (   | CORP.   |  |  |  |
| Name of corporation - must include suffix  |   |  |  |  |
| Dear Sir or Madam:   |   |  |  |  |
| The enclosed "Application by Foreign Corporation for Authorization to Transact Business in F. "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to registe above referenced foreign corporation to transact business in Florida. |   |  |  |  |
| Please return all correspondence concerning this matter to the following:  |   |  |  |  |
| Sîlvîa Vîla  |   |  |  |  |
| Name of Person   | Parameter March |  |  |  |
| ELAN BUSINESS SEDIFICES CORP.  |   |  |  |  |
| Firm/Company   |   |  |  |  |
| 1116 CEDAR FAUS DRÎVE Address  |   |  |  |  |
| WESTON, FL-33327   |   |  |  |  |
| City/State and Zip code  |   |  |  |  |
| E-mail address: (to be used for future annual report notification)   |   |  |  |  |
| For further information concerning this matter, please call:   |   |  |  |  |
| Spuia Via at (954) 217-6080  |   |  |  |  |
| 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                            | New Filing Section Division of Corporations P.O. Box 6327   |  |  |  |
| Enclosed is a check for the following amount:  |   |  |  |  |
| ☐ \$70.00 Filing Fee  \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 Fil Certificate of Status  | e of Status &   |  |  |  |

## 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.

| (Enter name of c                         | Orporation; must include forp," "Inc," "Co," or "Co | "INCORPORATED,"        | SECUP COMPANY,        | <b>XP.</b><br>" "CORPORATION             | 7,"   |           |            |
|--|---|------------------------|-----------------------|--|---|-----------|------------|
| me., co., c                              | orp, me, co, ur co.                                 | τ <b>μ.</b> )          |                       |  |   |           |            |
| (If name unavails                        | able in Florida, enter alter                        | nate corporate name    | adopted for the p     | ourpose of transactin                    | g business in Flor                              | ida)      |            |
| 2. <b>D</b>                              | ELAWARE y under the law of which                    | 3.                     |                       | 36-479                                   | 9747  |           |            |
|  |   |                        |                       |  |   |           |            |
| 4  | of incorporation)                                   | 5.                     |                       | PERPETVA                                 | <b>L</b>  |           |            |
| (Date                                    |   |                        |                       | ar corp. will cease to                   | exist or "perpetu                               | al")      |            |
| 6  |   | Ol 15                  |                       | to registration)                         |   |           |            |
|  |   | IS 607.1501 & 607.1:   |                       |  | ty)   |           |            |
| 7  | 10925   | NW 27th                | STREET                | #201-E                                   | HRAM, FL  | 33        | 172        |
|  |   | (Principal office add  | ress)                 |  |   |           |            |
| 10                                       | 925 NW 27   | th Street #            | #201-E                | MIAMI, FL                                | <u>33172                                   </u> |           |            |
|  |   | (Current mailing add   | ress)                 |  |   | <u></u>   | PV S       |
| 8. Name and stree                        | et address of Florida reg                           | gistered agent: (P.C   | D. Box <u>NOT</u> a   | cceptable)                               |   | 15 JAN 28 | ECRET      |
| Name:                                    | ELAN BUSINESS                                       | services co            | <u> 199.</u> - عن الن | y VILA                                   |   | 28        | ARY<br>CC  |
| Office Address:                          | 1116 CEDAR ?  | Faus Drive             |                       |  |   | AH II: 48 | OF STA     |
|  | <u>WESTON</u>                                       | City)                  | , Florida             | 33327                                    |   | £.        |            |
|  | (C  | City)                  |                       | (Zip code)                               |   |           | <i>7</i> 7 |
| designated in this                       | ed as registered agent<br>application, I hereby i   | accept the appointi    | nent as registe       | red agent and agr                        | ee to act in this                               | capac     | city. I    |
| further agree to c<br>duties, and I am f | omply with the provision                            | ons of all statutes i  | elative to the p      | proper and comple<br>as registered agent | te performance<br>t.                            | of my     | V          |
| _  |   | AVY                    |                       |  |   |           |            |
|  | (   | (Registered agent's si | gnature)              |  |   |           |            |

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: \_\_\_\_\_ Vice Chairman: Address: Director: \_\_\_ Address: Director: **B. OFFICERS** President: ADRIANA M. PIGNONE Address: 8362 PINES BLVD 197 PEMBROKE PINES. FL - 33024 Vice President: ADDIANA M. PIGNONE Address: 8302 Dines Blud. 197 PEMBROKE FINES, FL-33024 Secretary: ADDIANA M. PICHONE Address: 8362 PINES BLUD. 197 PERBOOKE PINES, FL 33024 Treasurer: ADGIANA M. PIGNONE Address: 8362 PINES BUD, 197 PEMBOOKE PINES FL 33024 NOTE: If necessary, you may attach an addendam/to the application listing additional officers and/or directors. 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.

ADRIANA M. PICNONE - PVST
(Typed or printed name and capacity of person signing application)

# Delaware

PAGE 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY "STAHL HUNTER LATAM BUYING GROUP

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

FIFTEENTH DAY OF JANUARY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STAHL HUNTER LATAM BUYING GROUP CORP." WAS INCORPORATED ON THE TWENTY-SEVENTH DAY OF OCTOBER, A.D. 2014.

SECRETARY OF STATE
DIVISION OF CORPORATIONS

15 INN 28 AM II: 48

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AUTHENTICA

Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 2041843

DATE: 01-15-15

You may verify this certificate online at corp.delaware.gov/authver.shtml