

Capitol Service, Inc.

1406 Hays St., Suite 2

Tallahassee, FL 32301

(850) 878-4734
Kathi or Brent

F02000000311

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Spring Footwear Corp. (Corporation Name) (Document #)
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 11:18

☐ Certified Copy

☐ Mail Out

☐ Will wait

☐ Photocopy

☒ Certificate of Status

NEW FILINGS

- ☒ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☒ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

400004784264--2
-01/18/02--01010--028
*****78.75 *****78.75

Examiner's Initials

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SPRING FOOTWEAR, Corporation
(Name of corporation - must include suffix)

FILED
02 JAN 18 PM 2:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", 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:

David Ben-Zikry
(Name of Person)
Spring Footwear, corp.
(Firm/Company)
68-14 Fresh Meadows Lane
(Address)
Fresh Meadows, New York 11365
(City/State and Zip code)

For further information concerning this matter, please call:

David Ben-Zikry at 954 - 785-9100
(Name of Person) (Area Code & Daytime Telephone Number)
(718) 359-3999

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

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

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PM 2:42
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

1. SPRING FOOTWEAR, Corp.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. New York. 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 1/17/1991 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. upon qualification
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 68-14 Fresh Meadows Lane, Fresh Meadows, NY 11365
(Principal office address)
68-14 Fresh Meadows Lane, Fresh Meadows, NY 11365
(Current mailing address)
8. Expanded warehouse facility + offices
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

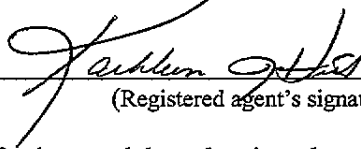
Name: Paralegal & Attorney Service Bureau, Inc.

Office Address: 1406 Hays St., Suite 2

Tallahassee, Florida 32301
(City) (Zip code)

10. 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) Kathleen J. Hill, Pres.

11. 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.

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

A. DIRECTORS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Chairman: David Ben-Zikry

Address: 77-12 167th street

Flushing NY 11366

Vice Chairman: Avi Ben-Zikry

Address: 76-39 167th street

Flushing NY 11366

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: DAVID Ben-Zikry

Address: 77-12 167th street

Flushing NY 11366

Vice President: AVRAHAM BEN Zikry

Address: 76-39 167th street

Flushing NY 11366

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. David Ben-Zikry
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. David Ben-Zikry (president)
(Typed or printed name and capacity of person signing application)

} **SS:**

FILED
JUN 18 PM 2:42
02
SECRET
TALLAHASSEE, FLORIDA

*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 27th day of December
two thousand and one.*

Heuber

Special Deputy Secretary of State

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