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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

Julie Castello GAVE  
AUTHORIZATION BY PHONE TO

CORRECT Corp. Name  
DATE 4/21/06  
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4099  
W06-18246



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04/17/06--01013--009 \*\*78.75

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2006 APR 21 PM 1:50  
TALLAHASSEE, FLORIDA

JP 4/21/06

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COVER LETTER

2006 APR 21 PM 1:50

TO: New Filing Section  
Division of Corporations

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

SUBJECT: New Castle Enterprises, 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," 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:

Julie Castillo

(Name of Person)

New Castle Enterprises, Inc

(Firm/Company)

150 East 56th Street

(Address)

New York, NY 10022

(City/State and Zip code)

For further information concerning this matter, please call:

Julie Castillo

(Name of Person)

at ( 212 ) 754-9287

(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

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FILED  
2006 APR 21 PM 1:50  
TALLAHASSEE FLORIDA

April 18, 2006

JULIE CASTILLO  
150 EAST 56TH STREET  
NEW YORK, NY 10022

SUBJECT: NEW CASTLE ENTERPRISES, INC.  
Ref. Number: W06000018246

We have received your document for NEW CASTLE ENTERPRISES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6973.

Claretha Golden  
Document Specialist  
New Filing Section

Letter Number: 106A00026301

**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. New Castle Enterprises, Inc.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

DE HERMES, INC.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

**2. New York**

(State or country under the law of which it is incorporated)

**3.**

(FEI number, if applicable)

**4. 3/28/1995**

(Date of incorporation)

**5.**

(Duration: Year corp. will cease to exist or "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. 150 East 56th Street, Suite 6B, New York, NY 10022**

(Principal office address)

**P.O. Box 285 FDR Station, New York, NY 10150**

(Current mailing address)

**8. Real property and commodity business lines**

(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 NOT acceptable)**

Name: Julie Castillo

Office Address: 1801 N Flagler Drive # 109

West Palm Beach, Florida 33407

(City)

(Zip code)

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STATE  
TALLAHASSEE FLORIDA

**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)

**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**

Chairman: Julie Castillo

Address: 1801 N Flagler Drive  
West Palm Beach, FL 33407

Vice Chairman: Joseph Hermes

Address: 1640 Presidential Way  
West Palm Beach, FL 33401

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Julie Castillo

Address: 1801 N Flagler Drive #109  
West Palm Beach, FL 33407

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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U.S. DISTRICT COURT  
MIDDLE DISTRICT  
FLORIDA

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

13. \_\_\_\_\_

(Signature of Director or Officer listed in number 12 of the application)

14. Julie Castillo, Chair and President

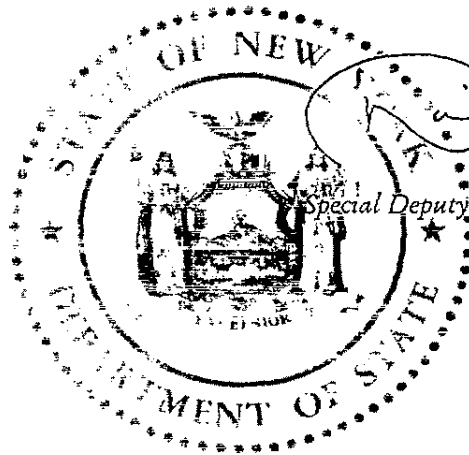
(Typed or printed name and capacity of person signing application)

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

I hereby certify, that the Certificate of Incorporation of NEW CASTLE ENTERPRISES, INC. was filed on 03/28/1995, 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 06th day of April two  
thousand and six.*



*Special Deputy Secretary of State*

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CLERK OF THE CLERK  
TALLAHASSEE FLORIDA

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