

# FD7000002852

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

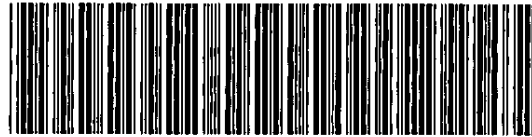
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Valerie GAVE  
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2007 MAY 30 P 4: 22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. WHITE MAY 31 2007

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** The Long Tide, 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:

Valerie Gora

(Name of Person)

The Long Tide, Inc., DBA Excellent Bodywork, Inc.

(Firm/Company)

5500 Military Trail, #22-345

(Address)

Jupiter, FL 33458

(City/State and Zip code)

For further information concerning this matter, please call:

Valerie Gora

(Name of Person)

at ( 847 ) 668-9310

(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

**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. The Long Tide, Inc.  
(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. Illinois 3. 36-4410842  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/20/2000 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. n/a  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5500 Military Trail #22-345, Jupiter FL 33458  
(Principal office address)  
5500 Military Trail #22-345, Jupiter FL 33458  
(Current mailing address)

8. Massage Therapy, Craniosacral Therapy, Personal Training  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

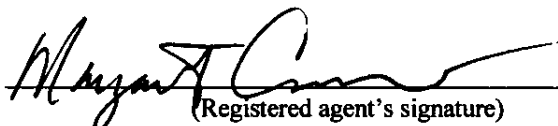
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Margaret Caruso

Office Address: 745 US Highway One, #208  
North Palm Beach, Florida 33408  
(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)

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: VALERIE GORA

**FILED**

Address: 5500 MILITARY TRAIL #22-345  
JUPITER, FL. 33458

2007 MAY 30 P 4: 22

Vice Chairman: \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

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

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

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

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

**B. OFFICERS**

President: Valerie Gora

Address: 109 Wettaw Lane, #104

North Palm Beach, FL. 33408

Vice President: Margaret Caruso

Address: 109 Wettaw Lane, #104

North Palm Beach, FL. 33408


Secretary: Margaret Caruso

Address: 109 Wettaw Lane, #104 North Palm Beach, FL. 33408

Treasurer: Margaret Caruso

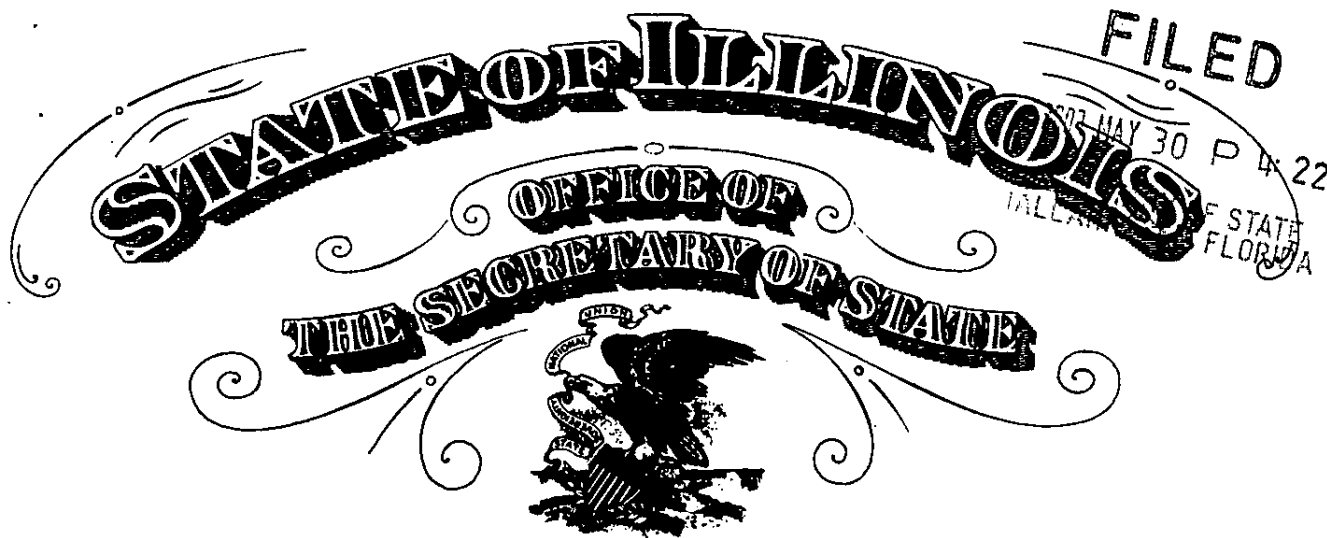
Address: 109 Wettaw Lane, #104 North Palm Beach, FL. 33408

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. VALERIE GORA, PRESIDENT  
(Typed or printed name and capacity of person signing application)

File Number 6138-700-5



***To all to whom these Presents Shall Come, Greeting:***

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that*

THE LONG TIDE, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON DECEMBER 20, 2000, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



***In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 22ND day of MAY A.D. 2007 .***

*Jesse White*

Authentication #: 0714202718

Authenticate at: <http://www.cyberdriveillinois.com>

SECRETARY OF STATE