F07000004127

(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:





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W07-38/47

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SECTED VAYOUSTATE

T. Burch: AUG 1 7 2000

COVER LETTER

Division of Corporations	
SUBJECT: The Regal G (Name of corpora	Ation - must include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation f "Certificate of Existence," and check are submitted t transact business in Florida.	or Authorization to Transact Business in Florida," to register the above referenced foreign corporation to
Please return all correspondence concerning this mat	tter to the following:
Gerarn	d Petrotto
The Regal	Gift Company
P.O.Bo	X 272859 ddress)
	,
(City/Star	on, FL 33487-3202. te and Zip code)
For further information concerning this matter, pleas	e call:
Tudy Brackott at (776) (Name of Person) (Are	O) 633-2323 ea 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 & \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 6, 2007

GERARND PETROTTO PO BOX 272859 BOCA RATON, FL 33487-3202

SUBJECT: THE REGAL GIFT COMPANY INC

Ref. Number: W07000038147

We have received your document for THE REGAL GIFT COMPANY INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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

Please return 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) 245-6928.

Tim Burch Document Specialist

Letter Number: 107A00048284

07 NUG 16 PE 4: 3

LICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTI	ED TO		
1The Recal Gift Company. Incorporated	DATI O:3S	2007	
1			Т
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	5		
		0	Т
	- ``` > -	₽ ($\overline{}$
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in	n Florida		
2. <u>Georgia</u> 3. <u>59-3823570</u> (State or country under the law of which it is incorporated) (FEI number, if applicable)		94	
(State or country under the law of which it is incorporated) (FEI number, if applicable)			
4. ODIT (Date of incorporation) 5. OPT OFT US (Duration: Year corp. will cease to exist or "pe			
6 .	ipetuai)	•	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)			
	1104	7	
7. (672 Forsyth St. #2 Boca Katon, FL 33 (Principal office address)	78/		
Po Box 272859, Boca Raton, Fl 33427			
(Current mailing address)		_	
8. (Purpose(s) of corporation authorized in home state or country to be carried out, in state of Florida)		<u>. </u>	
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)			
Name: Gerand Petrotto			
Office Address: 672 Forsuth St. #2			
Boar Potrio			
, Florida 33487 (City) (Zip code)			
(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	n at the	place	
designated in this application, I hereby accept the appointment as registered agent and agree to act in the further agree to comply with the provisions of all statutes relative to the proper and complete performance.	nis capa nca of n	icity. I w dutio	c
and I am familiar with and accept the obligations of my position as registered agent.	ice of m	iy uunc.	3,
$\Lambda / \mathcal{L} \Lambda$			
(Régistered agent's signature)			
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this Department of State by the Socretory of State or other official begins queted to forestern and in the Department of State by the Socretory of State or other official begins queted to of corrections and the secretory of State or other official begins queted to official begins and the secretory of the secretory of State or other official begins and the secretory of the s	s applic	ation to	
the Department of State, by the Secretary of State or other official having custody of corporate records in	me juris	diction	

under the law of which it is incorporated.

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

Control No. 0561358

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

THE REGAL GIFT COMPANY INCORPORATED

Domestic Profit Corporation

was formed or was authorized to transact business on 09/13/2005 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 27th day of July, 2007

> Karen C Handel Secretary of State

aun CHandel

Certification Number: 1552054-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp