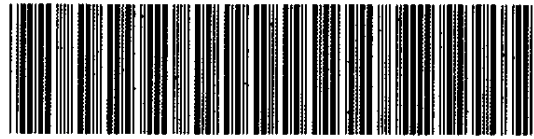


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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(me)

Phone #)

IT

☐ MAIL

(Business Entity Name)

(Document Number)

Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

[Handwritten signature]
8/18

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Fence Warehouse 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:

Edward Tagliametti
(Name of Person)

FENCE WAREHOUSE INC.
(Firm/Company)

4465 ARTIMUR Hill Rd Suite #1
(Address)

STATEN Island, N.Y. 10309
(City/State and Zip code)

For further information concerning this matter, please call:

Edward Tagliametti 917-647-9102
(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

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
- 3 TOTAL (96.25)

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

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

2. New York 3. 13-3791316
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 9/26/94 5. —
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 9/26/94
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. EDUARDO TALLIANETTI 5322 OBBY COURT Cape Coral FL 33904
(Principal office address)
4465 ARTHUR HILL Rd Suite #1, STATEN ISLAND, N.Y. 10309
(Current mailing address)

8. TO CONDUCT A RETAIL WHOLESALE AND INSTALLATION OF FENCE
(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)

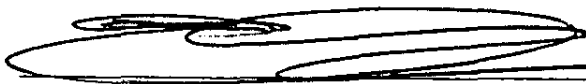
Name: EDUARDO TALLIANETTI

Office Address: 5322 OBBY Ct.
Cape Coral, FL, Florida 33904
(City) (Zip code)

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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: EDWARD TALLIANETTI

Address: 4465 BROTHUR HILL RD SUT #1
STATEN ISLAND, N.Y. 10309

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: EDWARD TALLIANETTI

Address: SAME ABOVE.

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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. EDWARD TALLIANETTI 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 *PENCE WAREHOUSE, INC.* was filed on 09/26/1994, 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.

The Biennial Statement is past due.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 10th day of June
two thousand and eight.*

A handwritten signature in black ink, appearing to read "Daniel Shapiro".

Daniel Shapiro
Special Deputy Secretary of State