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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

08'NOV -3 AM 9:27

TO: New Filing Section Division of Corporations	55 M. 5 E.				
SUBJECT: NORSTAR	GLOBAL IMPORTS INC.				
(Name of co	orporation - must include suffix)				
Dear Sir or Madam:					
	tion for Authorization to Transact Business in Florida," itted to register the above referenced foreign corporation to				
Please return all correspondence concerning this					
ANDEZA	JAKU BOWSKI				
(Name of Person)					
NORSTAR	Firm/Company) WW BOND SUITE A (Address) My 1/787 y/State and Zip code)				
(I	Firm/Company)				
95 SMI 4h to	WN BOND SUITE A				
	(Address)				
SMith Your	M 11787				
(Cit	y/State and Zip code)				
For further information concerning this matter,	please call:				
Anacla JAKUBOWSKI at ((Area Code & Daytime Telephone Number)				
(Name of Person)	(Area Code & Daytime Telephone Number)				
STREET/COURIER ADDRESS: New Filing Section	MAILING ADDRESS: New Filing Section				
Division of Corporations	Division of Corporations				
Clifton Building P.O. Box 6327					
2661 Executive Center Circle Tallahassee, FL 32314					
Tallahassee, FL 32301					
Enclosed is a check for the following amount:					
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of State					



SECRETARY OF STATE DIVISION OF CORPORATIONS

08 NOV -3 AM 9: 27

FLORIDA DEPARTMENT OF STATE Division of Corporations

October 14, 2008

ANGELA JAKUBOWSKI 95 SMITHTOWN BLVD. SUITE A SMITHTOWN, NY 11787

SUBJECT: NORSTAR GLOBAL IMPORTS INC.

Ref. Number: W08000047286

We have received your document for NORSTAR GLOBAL IMPORTS 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 designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The registered agent must sign accepting the designation.

Please return the corrected 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.

TO THE PARTY OF TH

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 708A00053727

08 NOV -3 AH 8: OC

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

		ION TO TRANSAC	T BUSINES	S, THE FOLLOWING IS SUBM IS IN THE STATE OF FLORID.		
1	ORSTAR			RTS INC.		
	orporation; must inclu orp," "Inc," "Co," or "(ED," "COMI	PANY," "CORPORATION,"		
(10)	11				' 771. '.1.\	
•		·-	-	or the purpose of transacting busin	_	
2. Ne	w YORK under the law of which	it is incornerated)	3	20-534/13: (FEI number, if applicable)	>	
				PERPETUAL		
4(Date	NST 3 20 of incorporation)	06	5(Duratio	on: Year corp. will cease to exist on	r "perpetual")	
6.	,		`	•	,	
	(SEE SECTION	ONS 607.1501 & 607	7.1502, F.S.,	if prior to registration) to determine penalty liability)		
7. 95	SMIDHOWN	BIVD	SteA	SMITH YOUND	4/178	7
,		(Principal office a	nddress)		/	
SAM	IE AS AC	OVE				
		(Current mailing a	address)			
	NE IMPOR				08	SIVIC
(Purpose(s) of corporation author	rized in home state or	r country to b	be carried out in state of Florida)	NON S	28
9. Name and stree	t address of Florida	registered agent: (F	P.O. Box N	OT acceptable)	7-3	글목
Name:	NATALIA	PONOMAR.	JOVA		a \$	
Off. A 11		2 ND JURI		TE 207	•	Sec
Office Address:	100 00	1		22001	^{URAI} I 9: 28	ΪΑΙ
	CAPE	CORAL	, Fl	orida <u>2277/</u> (Zip code)	ONS	, rej
		(City)		(Zip code)		
	gent's acceptance: ad as registered age	nt and to accent se	rvice of pro	cess for the above stated corpo	ration at the nl	ace
designated in this	application, I hereb	y accept the appoir	ntment as r	egistered agent and agree to ac	t in this capaci	ity. I
	omply with the prove with and accept the			the proper and complete perforesistered agent.	ormance of my	duties
	with and accept the		position as			
	Del	/ - / wa	\ 	20 4 0 4 n 0 - 0 / 1		
_	(Paris	tered agent's signatur	TITUH-	PONOMARTONA		
	\mathcal{A}					
11. Attached is a	certificate of existen	ce duly authenticate	ed, not more	than 90 days prior to delivery	of this applicati	ion 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.

SECRETARY OF STATE 12. Names and business addresses of officers and/or directors: A. DIRECTORS 08 NOV -3 AM 9: 28 Chairman: Vice Chairman: Address: ______ Director: Address: _____ Director: Address: _____ **B. OFFICERS** President: ANGEZA JAKUBOWSKY Address: 95541THTOWN BLVD SUITE A Surthtown Ry 11787 Vice President: ___ Address: __ Secretary: Address: ___ Treasurer: Address:

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

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

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

13. _____

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of NORSTAR GLOBAL IMPORTS INC. was filed on 08/03/2006, 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 03rd day of October two thousand and eight.



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OR NOW -3 MM OF STATIONS