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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE FLORING

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#### **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: WEGMAN BROS., INC.	
Name of corporation	on - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation fo "Certificate of Existence," or "Certificate of Good Sta above referenced foreign corporation to transact busing	inding" and check are submitted to register the
Please return all correspondence concerning this matter	er to the following:
TRESSA CATALINA	
Name o	f Person
ZIMNY & ASSOCIATES, P.A.	
Firm/Co	mpany
64 READS WAY	
Add	ress
NEW CASTLE, DE 19720	
City/State	and Zip code
wegman.brothers@verizon.net	
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	call:
DEBORAH WEGMAN at (302	չ 353-7540
	a Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Enclosed is a check for the following amount:	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
_	□ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy □ Certificate of Status & Certified Copy

# Memo

### Zimny & Associates, P.A.

64 Read's Way • New Castle, DE, 19720 Phone: 302-325-6900 • Fax: 302-325-6909

Date:

January 6, 2011

To:

FL Division of Corporations - New Filing Section

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

From:

Tressa Catalina

CC:

Client File

RE:

Wegman Bros., Inc.

Enclosed please find our check #5417 in the amount of \$70.00 and the required documents necessary to register Wegman Bros., Inc. to transact business in Florida as a Foreign Corporation. Once the Company has been approved, please send the proof of qualification and any other executed documents to our address listed above.

To expedite this process, please use our Federal Express account #163488396 to return the documents via Priority Overnight to us (bill to recipient).

If you have any questions, please feel free to contact our office.

Thank you!

### 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. WEGMAN BRO	OS., INC.			
(Enter name of co	orporation; must include "INCORPORAT orp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"	
(If name unavaila	able in Florida, enter alternate corporate na	ıme	adopted for the purpose of transacting business in Florida)	•
DELAWARE		3.	51-0084210	
(State or country	under the law of which it is incorporated)	-	(FEI number, if applicable)	
OCTOBER 7,	1959	5.	PERPETUAL	_
(Date	of incorporation)	,	(Duration: Year corp. will cease to exist or "perpetual")	
700 FL F701 FF	(SEE SECTIONS 607.1501 & 60		n Florida, if prior to registration) 502, F.S., to determine penalty liability)	•
703 FLETCHER	R ROAD SE, PALM BAY, FL 32909 (Principal office	add	ress)	-
PO ROY 7825	NEWARK, DE 19714-7625		,	
10 00% 7020,	(Current mailing	ado	Iress)	-
	N ANY LAWFUL ACT OR ACTIVITY			·
(Purpose(s	of corporation authorized in home state	or c	ountry to be carried out in state of Florida)	
. Name and stree	et address of Florida registered agent:	(P.¢	D. Box NOT acceptable)	是一
Name:	DEBORAH WEGMAN			<u>'</u>
Office Address:	703 FLETCHER ROAD SE		The second secon	PH 2:
	PALM BAY		, Florida 32909	5日 記 公
	(City)		(Zip code)	気の
Having been nam designated in this further agree to c	application, I hereby accept the appo	int les i	ice of process for the above stated corporation at the ment as registered agent and agree to act in this capa relative to the proper and complete performance of m osition as registered agent.	city. I

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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:

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. DIRECTORS	11 JAN -7 PH 2: 38
hairman: N/A	SECRETARY OF STATE
ddress:	eat 1 4 St A C C C U U U I I I I I I I I I I I I I I
ce Chairman: N/A	
idress:	
rector: N/A	
dress:	
rector: N/A	
dress:	
OFFICERS sident: CHARLES WEGMAN	
PO BOX 7625, NEWARK, DE 19714-7625	
e President: N/A	
dress:	
TETERTY: DEBORAH WEGMAN	
dress: PO BOX 7625, NEWARK, DE 19714-7625	
asurer: DEBORAH WEGMAN	
dress: PO BOX 7625, NEWARK, DE 19714-7625	
OTE: If necessary, you may attach an addendum to the	application listing additional officers and/or directors.
(Signature of Director or Officer list	ed in number 12 of the application)

14. DEBORAH WEGMAN, SECRETARY/TREASURER

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

## Delaware

PAGE

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "WEGMAN BROS., INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF JANUARY,

A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.



0542922 8300

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AUTHENTYCATION: 8471448

DATE: 01-04-11

You may verify this certificate online at corp.delaware.gov/authver.shtml