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P3 2/25/11

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: SOFGEN AMERICAS, 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," or "Certificate of Good Standing" 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:

MYRA TWEEDY

Name of Person

BERNSTEIN & DRUCKER P.C.

Firm/Company

450 SEVENTH AVENUE, SUITE 2701

Address

NEW YORK, NEW YORK 10123-0073

City/State and Zip code

MYRA@BDNYC.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MYRA TWEEDY

Name of Person

at (212) 967-3950

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. SOFGEN AMERICAS, INC.

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

SOFGEN AMERICAS

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

2. NEW YORK

(State or country under the law of which it is incorporated)

3. _____

(FEI number, if applicable)

4. OCTOBER 12, 2004

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. _____

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

7. ONE GATEWAY CENTER - 26TH FL, NEWARK, NEW JERSEY

(Principal office address)

ONE GATEWAY CENTER - 26TH FL, NEWARK, NEW JERSEY

(Current mailing address)

8. IT SERVICES TO FINANCIAL INSTITUTIONS

(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: VINCENT J. RANIERE

Office Address: 1031 BLUEBIRD AVENUE

MIAMI SPRINGS

(City)

, Florida 33166

(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.

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CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: ANDRE ISRAEL

Address: GENEVA BUSINESS CENTER - 12 AVENUE DES MORGINES
1213 PETIT-LANCY, GENEVA SEITZERLAND

Director: KATIA MAISONNEUVE

Address: GENEVA BUSINESS CENTER - 12 AVENUE DES MORGINES
1213 PETIT-LANCY, GENEVA SEITZERLAND

B. OFFICERS

President: DAVID HATCHER

Address: ONE GATEWAY CENTER - 26TH FL
NEWARK, NEW JERSEY

Vice President: VINCENT J. RANIERE

Address: ONE GATEWAY CENTER - 26TH FL
NEWARK, NEW JERSEY

Secretary: _____

Address: _____

Treasurer: DIVYA RAMESH

Address: ONE GATEWAY CENTER - 26TH FL, NEWARK, NEW JERSEY

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

13. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. VINCENT J. RANIERE - VICE PRESIDENT

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

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NEWARK, NEW JERSEY

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of SOFGEN AMERICAS, INC. was filed on 10/12/2004, under the name of ITSS AMERICAS, INC., 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.

A Certificate of Amendment ITSS AMERICAS, INC., changing its name to FOT AMERICAS, INC., was filed 07/27/2005.

A Certificate of Amendment FOT AMERICAS, INC., changing its name to SOFGEN AMERICAS, INC., was filed 07/22/2008.



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STATE OF NEW YORK
DEPARTMENT OF STATE

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 15th day of February two
thousand and eleven.*

First Deputy Secretary of State