

F110000003549

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

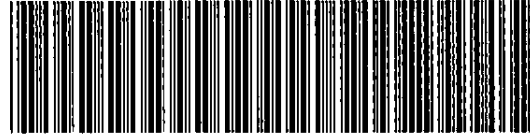
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Denna Hagemeyer **DATE**
AUTHORIZATION BY PHONE TO
CORRECT *Add Alternate name*
DATE *9/1/11*
DOC. EXAM *MRS*

Office Use Only



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08/04/11--01023--004 **70.00

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11 AUG 31 PM 1:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS 9/1

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: CNS INDUSTRIES, 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:

STEVE CINA

Name of Person

CNS INDUSTRIES, INC. dba: SUPERCO SPECIALTY PRODUCTS

Firm/Company

25041 ANZA DRIVE

Address

VALENCIA, CA 91355

City/State and Zip code

steve.cina@supercoproducts.com

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

For further information concerning this matter, please call:

Donna Hagemeier

Name of Person

at (661) 775-8877

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

11 AUG 31 AM 10:54

DIVISION OF CORPORATIONS

August 5, 2011

STEVE CINA
CNS INDUSTRIES, INC
25041 ANZA DRIVE
VALENCIA, CA 91355

SUBJECT: CNS INDUSTRIES, INC.
Ref. Number: W11000041093

We have received your document for CNS INDUSTRIES, 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 name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The name CNS INDUSTRIES CORPORATION is not available also.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist II

Letter Number: 611A00018452

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

SUPERCO SPECIALTY PRODUCTS CO.

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

2. CALIFORNIA 3. 95-4488451
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 6/28/1994 5. perpetual
(Date of incorporation) (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. 25041 ANZA DRIVE, VALENCIA, CA 91355
(Principal office address)

25041 ANZA DRIVE, VALENCIA, CA 91355
(Current mailing address)

8. WHOLESALE SPECIALTY MAINTENANCE PRODUCTS
(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)

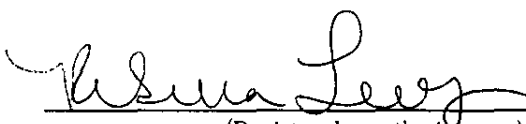
Name: REBECCA LEVY

Office Address: 22207 BELLA LAGO DR. #1414

BOCA RATON, Florida 33433
(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 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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

FILED

Chairman: _____

11 AUG 31 PM 1:50

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: STEVE CINA

Address: 26803 VAN GOGH, VALENCIA, CA 91355

Vice President: _____

Address: _____

Secretary: VIRGINIA CINA

Address: 26803 VAN GOGH, VALENCIA, CA 91355

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

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. STEVE CINA, PRESIDENT & CEO

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

State of California
Secretary of State

CERTIFICATE OF STATUS

FILED

11 AUG 31 PM 1:50

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

ENTITY NAME:

CNS INDUSTRIES, INC.

FILE NUMBER: C1746641
FORMATION DATE: 06/28/1994
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of June 30, 2011.

Debra Bowen

DEBRA BOWEN
Secretary of State