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Electronic Filing Menu

Corporate Filing Menu

Help

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VOITARDRADO TO

Z609889998

## COVER LETTER

TO: New Filing Section **Division of Corporations** 

BRIONI ROMAN STYLE USA CORP. SUBJECT:

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:

TONY LEE

Name of Person

BRIONI ROMAN STYLE USA CORP.

Firm/Company

Address

730 FIFTH AVENUE, SUITE 606

NEW YORK, NY 10019

City/State and Zip code

TONY.LEE@BRIONI.COM

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

For further information concerning this matter, please call:

TODD BARRATO

at  $(_{212}^{212})$ <del>332-69</del>00 کړ

Name of Person

Area Code & Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations

Tallahassee, PL 32314

New Filing Section

P.O. Box 6327

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:

S70.00 Filing Fee & Certificate of Status

578.75 Filing Fee & Certified Copy

\$87.50 Filing Fee, Certificate of Status & Certified Copy

FL010 - 03/01/2011 CT System Online

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE REGISTER A FOR	E WITH SECTION 607. I 503, FLORIDA REIGN CORPORATION TO TRANSACT	STATUTES, THE FOLLOWING IS SUBMITTED TO BUSINESS IN THE STATE OF FLORIDA.	12 A	
1 BRIONI ROMA	N STYLE USA CORP.	2. 41	AUG	7
(Enter name of o	orporation; must include "INCORPORATEI orp," "Inc," "Co," or."Corp.")	D," "COMPANY," "CORPORATION,"	-9 PH 4:	- F1
(If name unavaila	able in Florida, enter alternate corporate nam	e adopted for the purpose of transacting business in Florida)		
2. NEW YORK	3	13-3360238	വ	
	under the law of which it is incorporated)	(FEI number, if applicable)		
4. JUNE 2, 1986	2	PERPETUAL		
(Date	of incorporation)	(Duration: Year corp, will cease to exist or "perpetual")		
6. UPON QUALIF	ICATION			
		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)		
7 610 FIFTH AVE	NUE, SUITE 404, NEW YORK, NY 10020			
*	(Principal office ad	idress)		
730 FIFTH AVE	NUE, SUITE 606, NEW YORK, NY 10019			
<u></u>	(Current mailing ad	idress)		
8. RETAIL SALES	3			
(Purpose(s	) of corporation authorized in home state or (	country to be carried out in state of Florida)		
9. Name and stree	t address of Florida registered agent: (P.	O. Box NOT acceptable)		
Name:	C T Corporation System			
Office Address:	1200 South Pine Island Road			
	Plantation	Florida 33324		
	(City)	(Zip code)		
Having been name designated in this further agree to co	application, I hereby accept the appoint	vice of process for the above stated corporation at the p (ment as registered agent and agree to act in this capac relative to the proper and complete performance of my osition as registered agent.	ity. I	

Connie Bryan By: Com Assistant Secretary (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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12. Names and business addresses of officers and/or directors:

## A. DIRECTORS

Chairman: FRANCESCO PESCI

Address: 610 PIFTH AVENUE SUITE 404

NEW YORK, NY 10020	
Vice Chairman:	である しょう しょう しょう しょう しょう しょう しょう ひょう ひょう ひょう ひょう ひょう ひょう ひょう ひょう ひょう ひ
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Address:	5 J =
Director:	
Address:	
	<u> </u>
Director:	
Address:	

## **B. OFFICERS**

President: FRANCESCO PESCI

Address: 610 FIFTH AVENUE SUITE 404

NEW YORK, NY 10020

Vice President: TODD BARRATO-CEO

Address: 610 FIFTH AVENUE SUITE 404

NEW YORK, NY 10020

Secretary: JORDAN RINGEL

Address: 590 MADISON AVENUE, NEW YORK, NY 10019

Treasurer: \_SHEE LEE

Address: 730 FIFTH AVENUE, SUITE 605, NEW YORK, NY10019

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

13.

Signature of Director or Officer

The officer of 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. SHEE LEE-TREASURER

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

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Sector Sector

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of BRIONI ROMAN STYLE USA CORP. was filed on 06/02/1986, 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.



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Witness my hand and the official seal of the Department of State at the City of Albany, this 08th day of August two thousand and twelve.

Daniel Shapiro First Deputy Secretary of State

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Service State

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