

F12000004790

(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:

Office Use Only



400241479324

11/27/12--01014--001 \*\*70.00

FILED  
12 NOV 27 PM 3:05  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

FILED NOV 28 2012

-----

## COVER LETTER

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

**SUBJECT:** Black Operations, 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:

Samantha Jackson

Name of Person

Meriam Corporate Services, Inc.

Firm/Company

PO Box 52588

Address

Mesa AZ 85208

City/State and Zip code

meriamfinancial@gmail.com

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

For further information concerning this matter, please call:

Samantha Jackson

Name of Person

at ( 720 ) 318.8456

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. **Black Operations, Inc.**

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

(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. **45-3201367**

(FEI number, if applicable)

4. **09/06/2011**

(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. **2525 Ponce De Leon Blvd Ste 300 Coral Gables FL 33134**

(Principal office address)

**2525 Ponce De Leon Blvd Ste 300 Coral Gables FL 33134**

(Current mailing address)

8. **marketing and sales consulting**

(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: **Nona Black**

Office Address: **2525 Ponce De Leon Blvd Ste 300**

**Coral Gables**

(City)

, Florida **33134**

(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.

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

**A. DIRECTORS**

Chairman: Nona Black

Address: 2525 Ponce De Leon Blvd Ste 300 Coral Gables FL 33134

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Nona Black

Address: 2525 Ponce De Leon Blvd Ste 300 Coral Gables FL 33134

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Nona Black

Address: 2525 Ponce De Leon Blvd Ste 300 Coral Gables FL 33134

Vice President: Nona Black

Address: 2525 Ponce De Leon Blvd Ste 300 Coral Gables FL 33134

Secretary: Nona Black

Address: 2525 Ponce De Leon Blvd Ste 300 Coral Gables FL 33134

Treasurer: Nona Black

Address: 2525 Ponce De Leon Blvd Ste 300 Coral Gables FL 33134

**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. Nona Black, President

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

**State of New York**  
**Department of State** } ss:

I hereby certify, that the Certificate of Incorporation of BLACK OPERATIONS, INC. was filed on 09/06/2011, 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.



FILED  
12 NOV 27 PM 3:05  
SECRETARY OF STATE  
ALBANY, NY 12242

\*\*\*

*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 13th day of November two  
thousand and twelve.*

A handwritten signature in black ink, appearing to read "Neil A. ...", written over a horizontal line.

*First Deputy Secretary of State*