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Florida Department of State
Division of Corporations
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From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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FOREIGN PROFIT/NONPROFIT CORPORATION
JOTI, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: JOTI, 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:

Joseph Lambrinides

Name of Person

JOTI, Inc.

Firm/Company

2077 Imperial Circle

Address

Naples, Florida 34110

City/State and Zip code

jlambrinides@gmail.com

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

For further information concerning this matter, please call:

_____ at (_____) _____
Name of Person 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. JOTI, 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 adapted for the purpose of transacting business in Florida)

2. Ohio 3. 31-1403420
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. March 8, 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. 2077 Imperial Circle, Naples, Florida 34110
(Principal office address)

2077 Imperial Circle, Naples, Florida 34110
(Current mailing address)

8. Any lawful purpose, management company.
(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: Joseph Lambrinides

Office Address: 2077 Imperial Circle

Naples, Florida 34110
(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.

Joseph Lambrinides
Joseph Lambrinides (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: Joseph Lambrinides - Sole Director

Address: 2077 Imperial Circle

Naples, Florida 34110

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Joseph Lambrinides

Address: 2077 Imperial Circle

Naples, Florida 34110

Vice President: _____

Address: _____

Secretary: Patricia Lambrinides

Address: 2077 Imperial Circle, Naples, Florida 34110

Treasurer: Joseph Lambrinides

Address: 2077 Imperial Circle, Naples, Florida 34110

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

13. Joseph Lambrinides
Joseph Lambrinides 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. Joseph Lambrinides
(Typed or printed name and capacity of person signing application) Joseph Lambrinides,
President

12 DEC 19 11 41 AM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

United States of America
State of Ohio
Office of the Secretary of State

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show JOTI, INC., an Ohio corporation, Charter No. 866064, having its principal location in Cincinnati, County of Hamilton, was incorporated on March 08, 1994 and is currently in GOOD STANDING upon the records of this office.

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TALLAHASSEE, FLORIDA



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 18th day of December, A.D. 2012

Jon Husted

Ohio Secretary of State

Validation Number: V2012352D8517B