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(Re	questor's Name)		
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PICK-UP	☐ WAIT	MAIL	
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(Document Number)			
Certified Copies	_ Certificates	of Status	
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SECRETARY OF STATE
ANASSEF FLORIDA

1/4



COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: TRIMARK RAYGAL IN	NC.
	ion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good S above referenced foreign corporation to transact bus	standing" and check are submitted to register the
Please return all correspondence concerning this ma	tter to the following:
Name	of Person
TRIMARK RAYGAL INC.	
Firm/C	ompany
2801 MCGAW AVE.	Idress. The Englishes will be 28 v 20 km B bec.
IRVINE, CA 92614	ldress. The Englishes was to 28 ven Euro.
City/Stat	e and Zip code
dhallett@trimarkusa.com	
E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, please	se call:
Dirk Hallett at 949	398-8644 ea Code & Daytime Telephone Number
Name of Person Ar	ea Code & Daytime Telephone Number
-	
STREET/COURIER ADDRESS:	MAILING ADDRESS:
New Filing Section Division of Corporations	New Filing Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314
Enclosed is a check for the following amount:	
□ \$70.00 Filing Fee ■ \$78.75 Filing Fee & Certificate of Status-	\$87.50 Filing Fee & S87.50 Filing Fee,

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.

(Enter name of o	K RAYGAL INC. corporation; must include "INCORPORATE!	D," "COMPANY," "CORPORATION,"	
"Inc.," "Co.," "C	Corp," "Inc," "Cò," or "Corp.")		
	· · · · · · · · · · · · · · · · · · ·	ne adopted for the purpose of transacting business	in Florida)
2. CALIFOR		_{3.} <u>95-2707389</u>	
•	under the law of which it is incorporated)	(FEI number, if applicable)	
5.		PERPETUAL	
	e of incorporation)	(Duration: Year corp. will cease to exist or "p	erpetual!")
6. NOVEM	3ER 1, 2012		
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.	in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
, 2801 MC	GAW AVE. IRVINE, CA 9		
	(Principal office ac	ldress)	
2801 MC0	GAW AVE, IRVINE, CA926	314	
	(Current mailing ac	idress)	
RESTAURA	ANT & HOTEL FOOD SERVICE I	EQUIPMENT AND INTERIOR FURN	IISHING
o,) of corporation authorized in home state or		2 55 73
9. Name and stree	et address of Florida registered agent: (P	P.O. Box NOT acceptable)	DEC 31
	CT CORPORATION SYS		- 2 ω
Name:		 	- 2:-<
Office Address:	1200 SOUTH PINE ISLAND	RD.	AH III
	PLANTATION	, Florida 33324	109 T
	(City)	(Zip code)	- 器 5
Having been nam lesignated in this further agree to co	application, Thereby accept the appoin	vice of process for the above stated corporar timent as registered agent and agree to act h relative to the proper and complete perforn of my position as registered agent:	this capacity. I
1	Nadar Cul	Madonna Cuddi Special Assistant Se	hy c retary
•	[[(Registered/agent/s	WELIATING) .	•

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: Vice Chairman: Address: __ Director: Address: _ **B. OFFICERS** President: MERVIS, JACK H Address: 2801 MCGAW AVE. IRVINE, CA 92614 Vice President: PARKER, STEVEN W Address: 2801 MCGAW AVE. IRVINE, CA 92614

Address: 2801 MCGAW AVE. IRVINE, CA 92614

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

3. Signature of Director or Office

Address: 2801 MCGAW AVE. IRVIEN,CA 92614

Secretary: HALLETT, DIRK

Treasurer: HALLETT, DIRK

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. DIRK HALLETT, SECRETARY/TREASURER

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

TRIMARK RAYGAL, INC.

FILE NUMBER:

FORMATION DATE:

TYPE:

JURISDICTION:

STATUS:

C3387239

06/20/2011

DOMESTIC CORPORATION

CALIFORNIA

ACTIVE (GOOD STANDING)

12 DEC 31 AH II: 19
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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 December 14, 2012.

Jehn Bowen

DEBRA BOWEN
Secretary of State