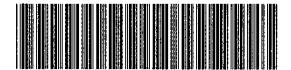
# F13000003626

| (Re                     | questor's Name)   |             |
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| (Ad                     | dress)            |             |
|                         |                   |             |
| (Ad                     | dress)            |             |
| (Cit                    | y/State/Zip/Phon  | e #)        |
| PICK-UP                 | ☐ WAIT            | MAIL        |
| (Bu                     | siness Entity Nar | ne)         |
|                         |                   |             |
| (Do                     | cument Number)    |             |
| Certified Copies        | _ Certificates    | s of Status |
| Special Instructions to | Filing Officer:   |             |
|                         |                   |             |
| ,                       |                   |             |
|                         |                   |             |
|                         |                   |             |

Office Use Only

WB-45067



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08/08/13--01015--011 \*\*78.75

13 AUG 21 PH 12: 47
SECRETARY OF STATE
ANASSEE, FLORID

1 08/26/13

August 19, 2013

Mr. Thomas Chang

New Filing Section

Florida Department of State

**Division of Corporations** 

PO Box 6327

Tallahassee, FL 32314

Re: Grab Bar Guys, Inc.

Ref. Number: W13000045067

Dear Mr. Chang:

Thank you for your letter of August 13, 2013, a copy of which I enclose. I also enclose the original application I previously submitted, and a copy of my previous cover letter. Since the above-referenced name, Grab Bar Guys, Inc. is distinguishable on Florida Division of Corporation records, I wish to proceed with filing the enclosed Application By Foreign Corporation for Authorization to Transact Business in Florida. The check in the amount of \$78.75 for the filing fee and Certificate of Status that I previously enclosed with my filing was already cashed. Thank you for your assistance.

Very truly yours,

Jan Estrine

PO Box 970872

Boca Raton, FL 33497



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 13, 2013

JAN ESTRINE PO BOX 970872 BOCA RATON, FL 33497

SUBJECT: GRAB BAR GUYS, INC. Ref. Number: W13000045067

We have received your document for GRAB BAR GUYS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is: THE GRAB BAR GUY "LLC", document number L09000055982.

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 013A00019328

### **COVER LETTER**

| то:           | New Filing Sec<br>Division of Cor                                                                    |                                                                                  |          |                                                                                 |                                                            |
|---------------|------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------|----------|---------------------------------------------------------------------------------|------------------------------------------------------------|
| SUBJ          | ECT:                                                                                                 | GRAB BO                                                                          | R G      | n - must include suffix                                                         |                                                            |
|               |                                                                                                      | Name of cor                                                                      | poration | n - must include suffix                                                         |                                                            |
| Dear S        | ir or Madam:                                                                                         |                                                                                  |          |                                                                                 |                                                            |
| "Certif       | ficate of Existence                                                                                  | tion by Foreign Corpora<br>te," or "Certificate of G<br>m corporation to transac | ood Sta  | Authorization to Transanding" and check are suless in Florida.                  | act Business in Florida," omitted to register the          |
| Please        | return all corresp                                                                                   | ondence concerning th                                                            | is matte | er to the following:                                                            |                                                            |
|               |                                                                                                      | JAV ESTA                                                                         | INE      | •                                                                               |                                                            |
|               |                                                                                                      | 7                                                                                | ame of   | Person                                                                          |                                                            |
|               |                                                                                                      | GRAB BAR 6                                                                       | JYs,     | INC.                                                                            |                                                            |
|               |                                                                                                      |                                                                                  |          |                                                                                 |                                                            |
|               |                                                                                                      | PO BOX 970                                                                       | 872      | Ų                                                                               |                                                            |
|               |                                                                                                      |                                                                                  | Addr     | ess                                                                             |                                                            |
|               | <u>8</u>                                                                                             | OCA KATON, F                                                                     | =2       | 33497<br>and Zip code<br>S. com<br>for future annual report                     |                                                            |
|               |                                                                                                      | City                                                                             | /State a | ind Zip code                                                                    |                                                            |
|               | inf                                                                                                  | o e grabbar                                                                      | guy      | s.com                                                                           |                                                            |
|               |                                                                                                      | E-mail address: (to b                                                            | e used   | for future annual report                                                        | notification)                                              |
| For fur       |                                                                                                      | concerning this matter,                                                          |          |                                                                                 |                                                            |
| す             | an estri                                                                                             | NE at (                                                                          | 561      |                                                                                 | フ                                                          |
|               | Name of Perso                                                                                        | n                                                                                | Area     | Code & Daytime Teleph                                                           | one Number                                                 |
|               | STREET/COUNEW Filing Sec<br>Division of Cor<br>Clifton Building<br>2661 Executive<br>Tallahassee, FL | porations<br>g<br>Center Circle                                                  |          | MAILING A<br>New Filing Se<br>Division of Co<br>P.O. Box 632'<br>Tallahassee, F | ection<br>orporations<br>7                                 |
| Enclos        | ed is a check for                                                                                    | the following amount:                                                            |          |                                                                                 |                                                            |
| <b>□</b> \$70 | 0.00 Filing Fee                                                                                      | \$78.75 Filing Fee<br>Certificate of Stat                                        |          | \$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.

|                                             | GRAB BAR S rporation; must include "INCOR rp," "Inc," "Co," or "Corp.")                                                                     |                                         |                                                               | 27                                                       |
|---------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|---------------------------------------------------------------|----------------------------------------------------------|
| (If name unavaila                           | ble in Florida, enter alternate cor                                                                                                         | porate name adopt                       | ed for the purpose of transacting                             | business in Florida)                                     |
| 2. <u>Del</u> e                             | AWGCE<br>inder the law of which it is incorp                                                                                                | 3                                       | apphed                                                        |                                                          |
| (State or country u                         | 1 1                                                                                                                                         |                                         |                                                               | cable)                                                   |
| 4                                           | 7/22/13                                                                                                                                     | 5                                       | Derpetual                                                     | (4)                                                      |
|                                             | of incorporation)                                                                                                                           |                                         | ration: Year corp. will cease to e                            | exist or "perpetual")                                    |
| 6                                           |                                                                                                                                             | A ed business in Flori                  | ida, if prior to registration)                                |                                                          |
|                                             | (SEE SECTIONS 607.1.                                                                                                                        | 501 & 607,1502, F                       | .S., to determine penalty liability                           |                                                          |
| 7                                           | 21280 Rock 1                                                                                                                                | <u> Lidge Drin</u>                      | e, Boca Raton, Fl<br>a Raton, Fl 3.                           | 2 33428                                                  |
|                                             | (Princip                                                                                                                                    | oal office address)                     | , <u>, , , , , , , , , , , , , , , , , , </u>                 |                                                          |
|                                             | 10 Box 97087                                                                                                                                | t mailing address)                      | a Katon, HZ 3.                                                | 3497                                                     |
|                                             |                                                                                                                                             | act or act                              | ivities for which co                                          | porations may be organia                                 |
| 9. Name and street                          | address of Florida registered                                                                                                               | agent: (P.O. Bo                         | x NOT acceptable)                                             | Āv₁ →                                                    |
| Name:                                       | JAN ESTRINI                                                                                                                                 | ٤                                       |                                                               | 3 AUG                                                    |
| Office Address:                             | 21280 Rack R<br>Boca Ratan                                                                                                                  | idge Dr.                                |                                                               | HASS                                                     |
|                                             | Boca Raton                                                                                                                                  |                                         | , Florida <u>33428</u>                                        |                                                          |
|                                             | (City)                                                                                                                                      |                                         | (Zip code)                                                    | PH 12: 1                                                 |
| designated in this (<br>further agree to co | ent's acceptance: ed as registered agent and to application, I hereby accept t amply with the provisions of a amiliar with and accept the o | the appointment<br>all statutes relativ | as registered agent and agre<br>we to the proper and complete | corporation at the place<br>e to act in this capacity. I |
|                                             |                                                                                                                                             | 4                                       |                                                               |                                                          |

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.

(Registered agent's signature)

| 12. Names and business addresses of officers and/or directors:                                                                                                 |            |                   |                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------------|----------------------------------------|
| A. DIRECTORS                                                                                                                                                   |            |                   |                                        |
| Chairman:                                                                                                                                                      |            | <del></del>       | ,                                      |
| Address:                                                                                                                                                       |            |                   | ······································ |
|                                                                                                                                                                |            |                   |                                        |
| Vice Chairman:                                                                                                                                                 |            | <del></del>       |                                        |
| Address:                                                                                                                                                       |            |                   |                                        |
|                                                                                                                                                                |            |                   |                                        |
| Director: Jan Estrine                                                                                                                                          |            |                   |                                        |
| Address: 21280 Rock Ridge Drive                                                                                                                                |            |                   |                                        |
| Address: 21280 Rock Ridge Drive Boca Ration, FL 33428                                                                                                          |            |                   |                                        |
| Director:                                                                                                                                                      |            | -                 | ······································ |
| Address:                                                                                                                                                       | A SEC      | ದ                 | attached trib.                         |
|                                                                                                                                                                | <b>A</b> E | <del>R</del><br>G | ******                                 |
| B. OFFICERS                                                                                                                                                    | SSE        |                   | 1                                      |
|                                                                                                                                                                | E OF       | 7                 |                                        |
| President: JAN ESTRINE                                                                                                                                         | - REAT     | <u> 73</u>        | -                                      |
| Address: 21280 Rock Ridge Drive Boca Raton, FL 33428                                                                                                           | Dm<br>>    | 7                 |                                        |
| ,                                                                                                                                                              |            | <del>-</del>      | · · · · · · · · · · · · · · · · · · ·  |
| Vice President:                                                                                                                                                |            |                   |                                        |
| Address:                                                                                                                                                       |            | _                 |                                        |
|                                                                                                                                                                |            |                   |                                        |
| Secretary: JAN ESTRINE                                                                                                                                         |            |                   |                                        |
|                                                                                                                                                                | -334       | 128               | ·                                      |
| Treasurer: JAN ESTRINE                                                                                                                                         |            |                   | <u></u>                                |
| Address: 21280 Rock Ridge Dr., Boca Raton, FL                                                                                                                  | 334        | 128               | >                                      |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/o                                                            | r direct   | ors.              |                                        |
| 13. Ju Glud                                                                                                                                                    |            |                   |                                        |
| Signature of Director or Officer  The officer or director signing this document (and who is listed in number 12 above) affirms that the                        |            |                   |                                        |
| are true and that he or she is aware that false information submitted in a document to the Department a third degree felony as provided for in s.817.155, F.S. | of State   | const             | iitutes                                |
| 14. JAN ESTRING                                                                                                                                                |            |                   |                                        |
| (Typed or printed name and capacity of person signing application)                                                                                             |            |                   | <del></del>                            |

## Delaware

PAGE 1

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GRAB BAR GUYS, INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTIETH DAY OF JULY,

A.D. 2013.

13 AUG 21 PH 12: 47
SECRETARY OF STATE
TALLAHASSEF, FLORIDA

5371850 8300

130911994

AUTHENTYCATION: 0626370

DATE: 07-30-13

You may verify this certificate online at corp.delaware.gov/authver.shtml