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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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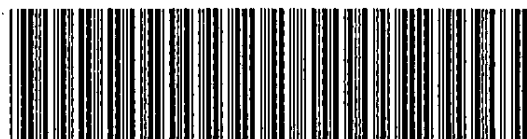
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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## COVER LETTER

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

**SUBJECT:** MARIA FIORINI RAMIREZ, 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:

MARIA FIORINI RAMIREZ  
Name of Person

MARIA FIORINI RAMIREZ, INC.  
Firm/Company

675 THIRD AVENUE 11<sup>th</sup> FLOOR  
Address

NEW YORK, NEW YORK 10017  
City/State and Zip code

MARIA@MFR.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

George RAMIREZ at ( 212 ) 4165036  
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.

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1. MARIA GORINI RAMIREZ, 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 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. JUNE 12 1992 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. NOT APPLICABLE  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 675 THIRD AVENUE 11<sup>th</sup> FLOOR NEW YORK, N.Y. 10017  
(Principal office address)

SAME  
(Current mailing address)

8. UNRESTRICTED  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

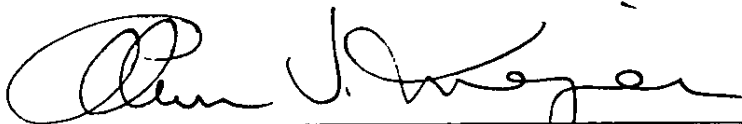
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: ALVARO MEJER, ESQ

Office Address: MEJER LAW 201 ALHAMBRA CIRCLE SUITE 504  
Coral Gables, Florida 33134  
(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.*



(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: MARIA FIORINI RAMIREZ

Address: 675 THIRD AVENUE 11<sup>th</sup> floor  
NEW YORK, N.Y. 10017

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

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

Director: GEORGE M. RAMIREZ

Address: 675 THIRD AVENUE 11<sup>th</sup> floor  
NEW YORK, N.Y. 10017

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

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

**B. OFFICERS**

President: MARIA FIORINI RAMIREZ

Address: 675 THIRD AVENUE 11<sup>th</sup> floor  
NEW YORK, N.Y. 10017

Vice President: \_\_\_\_\_

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

Secretary: ERNESTO MEJER

Address: 675 THIRD AVENUE 11<sup>th</sup> floor NEW YORK, N.Y. 10017

Treasurer: MARIA FIORINI RAMIREZ

Address: 675 THIRD AVENUE 11<sup>th</sup> floor NEW YORK, N.Y. 10017

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

13. Maria Fiorini Ramirez

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. MARIA FIORINI RAMIREZ, CHAIRMAN

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

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TALLAHASSEE FLORIDA

State of New York  
Department of State } ss:

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I hereby certify, that the Certificate of Incorporation of MARIA FIORINI RAMIREZ, INC. was filed on 06/12/1992, 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.

The Biennial Statement is past due.



\*\*\*

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

*Anthony Scardino*

Executive Deputy Secretary of State