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(((H13000233420 3)))



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Division of Corporations

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## FLORIDA PROFIT/NON PROFIT CORPORATION

Flowing Streams F.S. Inc

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 04      |
| Estimated Charge      | \$70.00 |

Electronic Filing Menu

Corporate Filing Menu

## tax audit # H1 3000233420

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| Flowing Stream  | ns F.S. Inc   |   | DITO X       |
|---|---|---|--------------|
| (Enter name of  | corporation; must include "INCORPORATED, corp," "Inc," "Co," or "Corp.")  | " "COMPANY," "CORPORATION,"   | CF STATE     |
| (If name unavail  | able in Florida, enter alternate corporate name   | adopted for the purpose of transacting business in  | Florida)     |
| New York  | 3   | 46-1698193  |              |
|   | under the law of which it is incorporated)  | (FEI number, if applicable)   |              |
| 1/16/2013   | 5   | Perpetual   |              |
|   | of incorporation)   | (Duration: Year corp. will cease to exist or "perp  | petual")     |
| Upon qualifica  | tion  |   |              |
| <del></del>   | (Date first transacted business i   | n Florida, if prior to registration)<br>502, F.S., to determine penalty liability)  |              |
| 8625 Transit P  |   | 502, F.S., to determine peranty hadding)  |              |
| - Transit Ki  | 1 #7, East Amherst, New York 14051 (Principal office add  |   |              |
| 9675 Tunnait D  | •   | 1633)   |              |
|   |   |   |              |
| 6025 Hansh K  | d #7, East Amherst, New York 14051 (Current mailing add   | ress  |              |
| 6023 Haish K  | (Current mailing add  | ress)   |              |
|   | (Current mailing add  | ress)   |              |
| All lawful busi   | (Current mailing add  |   |              |
| All lawful busi   | (Current mailing add  | ountry to be carried out in state of Florida)   |              |
| All lawful busi<br>(Purpose()   | (Current mailing addiness s) of corporation authorized in home state or co  | ountry to be carried out in state of Florida)   |              |
| All lawful busi<br>(Purpose):<br>Name and stree<br>Name:  | (Current mailing addiness s) of corporation authorized in home state or or et address of Florida registered agent: (P.C.  | ountry to be carried out in state of Florida)   |              |
| All lawful busi<br>(Purpose):<br>Name and stree<br>Name:  | (Current mailing addiness s) of corporation authorized in home state or or et address of Florida registered agent: (P.C. Business Filings Incorporated  | ountry to be carried out in state of Florida)  D. Box NOT acceptable)   |              |
| All lawful busi (Purpose() Name and street  | (Current mailing addiness  e) of corporation authorized in home state or coet address of Florida registered agent: (P.C. Business Filings Incorporated  515 E. Park Avenue,   | ountry to be carried out in state of Florida)   |              |
| All lawful busi (Purpose)  Name and stree  Name:  office Address:  O. Registered a.  laving been namesignated in this sorther agree to cond I am familian | (Current mailing addiness s) of corporation authorized in home state or exet address of Florida registered agent: (P.C. Business Filings Incorporated 515 E. Park Avenue,  Tallahassee  (City)  gent's acceptance: add as registered agent and to accept service application, I hereby accept the appointmomply with the provisions of all statutes remains and accept the obligations of my po | ountry to be carried out in state of Florida)  D. Box NOT acceptable) , Florida 32301  (Zip code)  ce of process for the above stated corporation ment as registered agent and agree to act in the elative to the proper and complete performance sition as registered agent. | is capacity  |
| All lawful busi (Purpose)  Name and stree  Name:  office Address:  O. Registered a.  laving been namesignated in this sorther agree to cond I am familian | (Current mailing addiness  s) of corporation authorized in home state or exet address of Florida registered agent: (P.C.  Business Filings Incorporated  515 E. Park Avenue,  Tallahassee  (City)  gent's acceptance: led as registered agent and to accept service application, I hereby accept the appointments omply with the provisions of all statutes resistered.                         | ountry to be carried out in state of Florida)  D. Box NOT acceptable) , Florida 32301  (Zip code)  ce of process for the above stated corporation ment as registered agent and agree to act in the elative to the proper and complete performance sition as registered agent. | is capacity. |

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.

Fax Qualit #H130002334203

| 12. Names and business addresses of officers and/or directors:  | 3.00 = A    |
|---|-------------|
| A. DIRECTORS  | 3 - N       |
| Chairman:   |             |
| Address:  | 23 -        |
|   | me a        |
| Vice Chairman:  | デン W        |
| Address:  | and the     |
|   |             |
| Director: William Moses   |             |
| 8625 Transit Rd #7, East Amherst, New York 14051  |             |
| Address:  |             |
| Director  |             |
| Director:  Address:   |             |
| Address.  |             |
|   |             |
| B. OFFICERS   |             |
| President: William Moses  8625 Transit Rd #7, East Amherst, New York 14051                                |             |
| Address:  | <del></del> |
|   |             |
| Vice President: William Moses   |             |
| 8625 Transit Rd #7, East Amherst, New York 14051 Address:   |             |
|   | <del></del> |
| Secretary: William Moses  |             |
| 8625 Transit Rd #7, East Amherst, New York 14051 Address:   |             |
| Treasurer: William Moses  | <u> </u>    |
| Address: 8625 Transit Rd #7, East Amherst, New York 14051   | <del></del> |
|   | •           |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or dire | ctors.      |
| (Signature of Director or Officer listed in number 12 of the application)                                 |             |
|   |             |
| 14. William Moses, 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 FLOWING STREAMS F.S. INC was filed on 01/16/2013, 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.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 15th day of October two thousand and thirteen.

Executive Deputy Secretary of State