

**F13000005401**

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



**500253948215**

12/09/13--01052--016 \*\*27.50

FILED  
13 DEC 16 PM 2:35  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

W13-67536

*K* 12/17/13



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 10, 2013

CARMEN J. SANCHEZ  
STRENTA FAMILY OFFICE SERVICES, INC.  
2400 NORTH COMMERCE PKWY., SUITE 104  
WESTON, FL 33326

SUBJECT: STRENTA FAMILY OFFICE SERVICES, INC.  
Ref. Number: W13000067536

We have received your document for STRENTA FAMILY OFFICE SERVICES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4) or 608.502(4), F.S., this office is required to collect a civil penalty of \$1,000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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: 113A00028097

## COVER LETTER

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

**SUBJECT:** STRENTA FAMILY OFFICE SERVICES, 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:

CARMEN J. SANCHEZ

Name of Person

STRENTA FAMILY OFFICE SERVICES, INC.

Firm/Company

2400 NORTH COMMERCE PARKWAY, SUITE 104

Address

WESTON, FL 33326

City/State and Zip code

CARMEN. SANCHEZ@STRENTA-FOS.COM

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

For further information concerning this matter, please call:

ESTHER CORCINO at ( 954 ) 217-4896

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. **STRENTA FAMILY OFFICE SERVICES, 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. **DELAWARE**

(State or country under the law of which it is incorporated)

3. **46-4068965**

(FEI number, if applicable)

4. **10/15/2013**

(Date of incorporation)

5. **PERPETUAL**

(Duration: Year corp. will cease to exist or "perpetual")

6. **UPON QUALIFICATION**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **2400 NORTH COMMERCE PARKWAY, SUITE 104, WESTON, FL 33326**

(Principal office address)

**2400 NORTH COMMERCE PARKWAY, SUITE 104, WESTON, FL 33326**

(Current mailing address)

8. **PROFESSIONAL SERVICES- FINANCE**

(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:

**BRIAN MISIUNAS, CPA**

Office Address:

**C/O PYMS 3225 AVIATION AVE, SUITE 500**

**MIAMI**

(City)

, Florida

**33133**

(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.

FILED  
13 DEC 16 PM 12:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

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

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

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

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

Director: **CARLOS FELICIANI**

Address: **2400 NORTH COMMERCE PARKWAY, SUITE 104**

**WESTON, FL 33326**

Director: **EDUARDO NOGUERA**

Address: **2400 NORTH COMMERCE PARKWAY, SUITE 104**

**WESTON, FL 33326**

**B. OFFICERS**

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

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

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

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

Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

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

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

13. \_\_\_\_\_

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. **CARLOS FELICIANI CEO**

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

13 DEC 16 PM 12:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "STRENTA FAMILY OFFICE SERVICES, 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 ELEVENTH DAY OF NOVEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STRENTA FAMILY OFFICE SERVICES, INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF OCTOBER, A.D. 2013.


AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

13 DEC 16 PM 12:36  
SECRETARY OF STATE  
HALLMARKS  
TALLAHASSEE, FLORIDA



5415595 8300

131292201

  
Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 0882968

DATE: 11-11-13  
131292201