

02/13/2014 16:08

(FAX)

P.002/006



December 10, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SUBJECT: ITALIAN TOUCH USA, INC.
REF: W13000067400

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE
12/9/13

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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

Sylvia Gilbert
Regulatory Specialist II
New Filing Section

FAX Aud. #: H13000269221
Letter Number: 113A00028045

PLEASE GIVE ORIGINAL SUBMISSION
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12/9/13

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14 FEB 13 PM 4:30
TALLAHASSEE, FLORIDA

P.O. BOX 6327 - Tallahassee, Florida 32314

H13000269221 3

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: ITALIANTOUCH USA, 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:

ROCCO TOTINO

Name of Person

GRASSI & CO

Firm/Company

488 MADISON AVENUE, 21ST FLOOR

Address

NEW YORK/NY 10022

City/State and Zip code

rtotino@grassicpas.com

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

For further information concerning this matter, please call:

Rocco Totino

at 212 223-5001

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

H13000269221 3

H13000269221 3

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. ITALIAN TOUCH USA INC

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co." or "Corp.")

Italiantouch the Luxer Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NEW YORK

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

3. 46-2600693

(FBI number, if applicable)

4. 04/19/2013

(Date of incorporation)

5. PERPETUAL

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

6. _____

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

7. C/O ALTIERI ESPOSITO & MINOLI, LLC, 420 FIFTH AVE, NY, NY 10018

(Principal office address)

C/O GRASSI & CO., 488 MADISON AVE, 21ST FL. NY, NY 10022

(Current mailing address)

8. E-COMMERCE ONLY; NO PHYSICAL PRESENCE IN FLORIDA

(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: NRAI Services, Inc.

Office Address: 1200 SOUTH PINE ISLAND ROAD, SUITE 250

PLANTATION

(City)

Florida 33324

(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.

Katie Wonsch

Katie Wonsch,
Assistant Secretary

(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.

H13000269221 3

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

H13000269221 3

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

A. DIRECTORS

Chairman: ALESSANDRO SANTAMARIAAddress: C/O ALTIERI ESPOSITO & MINOLI PLLC, 420 FIFTH AVENUE
26TH FLOOR, NEW YORK, NY 10018

Vice Chairman: _____

Address: _____

Director: EUGENIO MINOLIAddress: C/O ALTIERI ESPOSITO & MINOLI PLLC, 420 FIFTH AVENUE
26TH FLOOR, NEW YORK, NY 10018Director: PATRICIA PREZIOSOAddress: C/O ALTIERI ESPOSITO & MINOLI PLLC, 420 FIFTH AVENUE
26TH FLOOR, NEW YORK, NY 10018

B. OFFICERS

President: ALESSANDRO SANTAMARIAAddress: C/O ALTIERI ESPOSITO & MINOLI PLLC, 420 FIFTH AVENUE
26TH FLOOR, NEW YORK, NY 10018

Vice President: _____

Address: _____

Secretary: EUGENIO MINOLIAddress: C/O ALTIERI ESPOSITO & MINOLI PLLC, 420 5TH AVE, NYC 10018Treasurer: ALESSANDRO SANTAMARIAAddress: C/O ALTIERI ESPOSITO & MINOLI PLLC, 420 5TH AVE, NYC 10018

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. Eugenio Minoli, Secretary

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

H13000269221 3

H13000269221 3

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of ITALIAN TOUCH USA, INC. was filed on 04/19/2013, 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 02nd day of December two
thousand and thirteen.

Anthony Scardino

Executive Deputy Secretary of State

H13000269221 3