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#277 P.001/005

Division of Corporations

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FOREIGN PROFIT/NONPROFIT CORPORATION JESSICA C. SCHWARTZ DDS P.C. PA

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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.

(Enter name of c	A C. SCHWARTZ DDS P. orporation; must include "INCORPORATED forp," "Inc," "Co," or "Corp.")		
, ,			
(If name unavail	able in Florida, enter alternate corporate name	e adopted for the purpose of transacting business in	Florida)
NEW YO	RK 3	46-1617213	#
	under the law of which it is incorporated)	(FEI number, if applicable)	(E)
12/19/20	12 ₅	, PERPETUAL	
	e of incorporation)	(Duration: Year corp. will cease to exist or "per	petual")
		in Florida, if prior to registration)	ঝু
1004 NIEI	•	1502, F.S., to determine penalty fiability)	er.
1081 NEL	SON WALK, NAPLES, F		
1001 NEI	Principal office ad. SON WALK, NAPLES, FL.	•	
TOOTINEL	(Current mailing ad		
	(Carrott maring ac	arossy	
DENTIST	ΓRY		
(Purpose(s	s) of corporation authorized in home state or	country to be carried out in state of Florida)	
Name and stree	et address of Florida registered agent: (P	.O. Box NOT acceptable)	
Name:	JESSICA C. SCHWAR	rz	
• • • • • • • • • • • • • • • • • • • •	1081 NELSON WALK,		
fice Address:			
	NAPLES	, Florida 34102 (Zip code)	
	(City)	(Zip code)	

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.

Georgia Schwartz
(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: JESSICA C. SCHWARTZ
Address: 1081 NELSON WALK, NAPLES, FL 34102
Address:
Vice Chairman:
Address:
Di
Director:
Address:
Director:
Address:
P. OFFICERS
B. OFFICERS
President: JESSICA C. SCHWARTZ
Address: 1081 NELSON WALK, NAPLES, FL 34102
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. Cessica Schwartz Signature of Director or Officer
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.
JESSICA C. SCHWARTZ (PRESIDENT)

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of JESSICA C. SCHWARTZ DDS P.C. was filed on 12/19/2012, 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.

I further certify that no other documents have been filed by such corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 04th day of June two thousand and fourteen.

Anthony Glardina

Executive Deputy Secretary of State

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