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Florida Department of State
Division of Corporations
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14 JUL -8 PM 1:57

SEALING TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION
PARAGON FINE ARTS FESTIVALS, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

B 7/9/14

14 JUL -8 AM 10:16

SECRETARY OF STATE
DIVISION OF CORPORATIONS

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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANACT BUSINESS IN THE STATE OF FLORIDA.

1. PARAGON FINE ARTS FESTIVALS, 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

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

3. 45-2779488

(FEI number, if applicable)

4. JULY 08, 2011

(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. 8258 MIDNIGHT PASS RD., SARASOTA, FL 34242

(Principal office address)

8258 MIDNIGHT PASS RD., SARASOTA, FL 34242

(Current mailing address)

8. ANY LAWFUL PURPOSE

(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: DENISE MAGUIRE

Office Address: 8258 MIDNIGHT PASS RD.

SARASOTA, Florida 34242
(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.

Denise Maguire
(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.

(((H14000162258 3)))

34 JUL - 8 AM 10:16
SECRETARY OF STATE
DIVISION OF CORPORATIONS

(((H14000162258 3)))

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: DENISE MAGUIRE

Address: 8258 MIDNIGHT PASS RD.
SARASOTA, FL 34242

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. Denise Maguire
(Signature of Director or Officer listed in number 12 of the application)

14. DENISE MAGUIRE, PRESIDENT
(Typed or printed name and capacity of person signing application)

(((H14000162258 3)))

14 JUL - 8 AM 10:16

STATE TARIFFS
DIVISION OF CORPORATIONS

((H14000162258 3))

State of New York
Department of State } **ss:**

I hereby certify, that the Certificate of Incorporation of PARAGON FINE ARTS FESTIVALS, INC. was filed on 07/06/2011, 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 the following:

A Biennial Statement was filed 07/16/2013.

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 03rd day of July
two thousand and fourteen.*

A handwritten signature in cursive script that reads "Anthony Giardina".

Anthony Giardina
Executive Deputy Secretary of State

201407070408 * LX

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RESUBMISSION



July 8, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

INTERSTATE FILINGS LLC

SUBJECT: PARAGON FINE ARTS FESTIVALS, INC.
REF: W14000041909

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 person designated as registered agent in the document and the person signing as registered agent must be the same.

The registered agent must have a Florida street address. A post office box is not acceptable.

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

Tyrone Scott
Regulatory Specialist II
New Filings Section

FAX Aud. #: E14000162258
Letter Number: 314A00014635