FILIDODO 3426

(Re	equestor's Name)		
(Address)			
(Ac	ddress)		
(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	MAIT	MAIL	
(Bu	ısiness Entity Nan	ne)	
(Do	ocument Number)		
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		

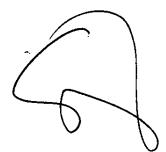
Office Use Only



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2014-AUG 11 PH 2: 20
SECRETARY OF STATE
TALLAHASSEE, FLORID



COVER LETTER

TO: New Filing Section Division of Corpo			
SUBJECT: RIB	BON WAREH	OUSE. COM,	INC.
bebalet	Name of corporati	on - must include suffix	
Dear Sir or Madam:			
"Certificate of Existence,"		for Authorization to Transactanding" and check are subtiness in Florida.	
Please return all correspon	ndence concerning this ma	tter to the following:	
	KENNETH I	M SADOWSK	V
	Name	M SADOWSK of Person	
		ompany	
	9587 EXBI	RY COURT	
	Ad	dress	
	PARKLAND.	ory Court Idress FL 33076	, 5
	City/Stat	e and Zip code	
	Kensadanisk	u Quahna a	O 144
	E-mail address: (to be use	y @ ya hoo . C	notification)
For further information co	oncerning this matter, pleas	se call:	
Kenneth M. C	hadowsky at (82	-8 \ 450 -7349	?
Name of Person	Ar	<u>8) 450 – 7349</u> ea Code & Daytime Telepho	one Number
STREET/COUR New Filing Section Division of Corporate		MAILING A New Filing Se Division of Co	ction
Clifton Building	·	P.O. Box 6327	
2661 Executive (Tallahassee, FL		Tallahassee, F	L 32314
Enclosed is a check for th	ne 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.

"Inc.," "Co.," "Corp," "Inc," "Co," or		" "COMPANY," "CORPORATION,"		
(If name unavailable in Florida, enter	alternate corporate name	adopted for the purpose of transacting bus	siness in Florida)	
2. DELAWARE		33-1071477	,	
(State or country under the law of wh	ich it is incorporated)	(FEI number, if applical	ble)	
4 9/18/03	•	, , , , , , , , , , , , , , , , , , ,	•	
(Date of incorporation)	J.	PERPETUAL (Duration: Year corp. will cease to exist	t or "perpetual")	
6.	8/15/14			
(Date i		n Florida, if prior to registration)		
		502, F.S., to determine penalty liability)		
7 44 SO. FIRST ST., N	EWHYDE PAR	K, NY11040		
P.O. Box 2034 A	IEW HYDE PA	RK. NY 11040	Ç1 ~ 3	
•	(Current mailing add	ress)	三 三	
			AUG 11 CRETAR	
8. Name and street address of Florida	registered agent: (P.0	O. Box <u>NOT</u> acceptable)	TAF ASS	<u> </u>
Name: KENNETH	M SADOWS	·KY	SEE.	
Office Address: 9587 E	EXBURY COUR	7 8 7	· FES	ir U
Office Address:	- KOOK 1 COO!	<u> </u>	981 ³ 2	
PARKLI	My	, Florida 33076 (Zip code)	Ew o	
	(City)	(Zip code)		

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)

10. 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.

11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman: KENNETH M SADOWSKY
Address: 9187 EXBURY COURT
PARKLAND, FL 33076
Vice Chairman: NORMAN SADOWSKY
Address: 189 ACRE LANE
HICKSVILLE, NY 11801
£
Director:
Address:
Director:
Address:
B. OFFICERS
President: KENNETH M SADOWSKY
Address: 9587 EXBURY COURT
PARKLAND, FL 33076
Vice President: NORMAN SADOWSKY
Address: 189 ACRE LANE
HICKSVILLE, NY 11801
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addondum to the application listing additional officers and/or directors.
12. 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.
13. KENNETH M. SADOWSKY, PRESIDENT
(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "RIBBON WAREHOUSE.COM, 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 TWENTY-FOURTH DAY OF

JULY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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AUTHEI

Jeffrey W. Bullock, Secretary of St AUTHENTYCATION: 1563390

DATE: 07-24-14

You may verify this certificate online at corp.delaware.gov/authver.shtml