# F1400003795

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



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SEP-8 AHII: 16



### FLORIDA DEPARTMENT OF STATE Division of Corporations

14 SEP -8 PM 3-36

August 14, 2014

PETER VETRANO BEVTEK, INC. P.O. BOX 776 HAINESPORT, NJ 08036

SUBJECT: BEVTEK, INC. Ref. Number: W14000049754

We have received your document for BEVTEK, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain both the street address of the principal office and the mailing address of the entity.

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.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 214A00017444

## **COVER LETTER**

TO: New Divis	Filing Sectionsion of Corpo				
SUBJECT:	BEVTE	K, INC.			
SUBJECT.		Name of co	rporation -	must include suffix	
Dear Sir or M	ladam:				
"Certificate of	of Existence,"		Good Stand	authorization to Transac ling" and check are subi s in Florida.	
	all correspon	dence concerning t	his matter	to the following:	
			Name of P	erson	
BEVTE	K, INC.				
		1	Firm/Comp	any	
P.O. BO	OX 776				
HAINES	SPORT,	NJ 08036	Addres	ss	
		Ci	ty/State an	d Zip code	
pvetrand	b.bevtek(	@gmail.com			
For further in	formation co	E-mail address: (to		or future annual report n	otification)
DEANA F	RACHUBA	N-SHULTZ at (	856	, 234-7788	
	ne of Person		Area C	ode & Daytime Telepho	one Number
New Divis Clift 2661	EET/COUR Filing Section sion of Corpoon Building Executive Cahassee, FL 3	rations enter Circle		MAILING AI New Filing Sec Division of Co P.O. Box 6327 Tallahassee, F	ction rporations
Enclosed is a	check for the	e following amount	:		
<b>5</b> \$70.00 Fi	ling Fee (	3 \$78.75 Filing Fe Certificate of Si		\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status &

# 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.

2. NEW JEF	RSEY	ame adopted for the purpose of transacting business in Flo.  3. $22-33.77217$	<b>-</b> ,
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)	
4. 06/01/199	95	5. PERPETUAL	
•	of incorporation)	(Duration: Year corp. will cease to exist or "perpet	tuai")
6. 5/1/2013			
		ess in Florida, if prior to registration) 07.1502, F.S., to determine penalty liability)	
7. LIDI Pa	rk Avenue East	Hainesport NJ 08036	<u></u>
P.O. BOX	776, HAINESPORT, NJ 0		
	(Current mailing		
			建
8. Name and stree	t address of Florida registered agent:	(P.O. Box NOT acceptable)	SS
Name:	PATRICIA VETRANO	 <del> </del>	- B
Office Address:	2517 FOXBRIDGE TERR	RACE,	<b>A</b>
	THE VILLAGES	, Florida 32162 (Zip code)	AM II: I
	(City)	(Zip code)	တ ရှ
	ed as registered agent and to accept s	service of process for the above stated corporation ointment as registered agent and agree to act in th	

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.

(Registered agent's signature)

11. Names and business addresses of officers and/or directors:
A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Director:
Address:
Director
Address:
B. OFFICERS
President: PETER R. VETRANO
Address: P.O. BOX 776, HAINESPORT, NJ 08036
Audiess.
Vice President: PATRICIA VETRANO
Address: 2517 FOXBRIDGE TERRACE, THE VILLAGES, FL 32162
Address:
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12.) July (Juliana) PRES 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. Peter R. Vetrano President (Typed or printed name and capacity of person signing application)
(13 bee of hymere mane capacity of betson signing abbiteation)

# STATE OF NEW JERSEY DIPARTMENT OF THE TREASURY SHORT FORM STANDING

#### BEVTEK, INC. 0100629334

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Profit Corporation was registered by this office on June 8, 1995.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify the registered agent and registered office are:

Gary F Mazzucco 110 Marter Avenue Suite 206 Morrestown, NJ 08057 0000

CONTHE STATE OF THE STATE OF TH

Carrificate Number: 133013700 Verify this certificat: online as

https://www.l.siase.nj.us/TYTR\_SuindingCert/JSP/Verify\_Cert.jsp

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 28th day of July, 2014

Andrew P Sidamon-Eristoff
State Treasurer

Page 1 of 1.