F140000004718

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to I	Filing Officer:	-"
		}

Office Use Only



800264881818

ALLAHASSEE OF STATE

14 NOV -7 AM 8: 29

DEPARTMENT OF STATE

14 NOV - 7 AM IQ: \$5

mD IIID



ON SERVICE COMPANY						
P	CCOUNT NO.	:	I20000	000195		
	REFERENCE	:	368607	4302440		
AUT	HORIZATION	:		D Vol		
	COST LIMIT	:	\$ 70	Louisde	nan	•
ORDER DATE : Novem	ber 6, 2014				20 -	•
ORDER TIME : 3:31	PM				ALL ALL	5
ORDER NO. : 36860	7-005				16.2% 1-2%	 -
CUSTOMER NO: 43	02440					A X X
		-			ع ـ ـ الأيت ـ ـ ـ	 2 _
	FOREIGN F	ILII	<u>IGS</u>			_
NAME: FL	EURCHEM, ING	С.				
XXXX QUALIFICATION	(TYPE: <u>CC</u>	<u>)</u>)				
PLEASE RETURN THE F	OLLOWING AS	PRO	OF OF I	FILING:		
CERTIFIED C XX PLAIN STAMP CERTIFICATE		MDI	ING			
CONTACT PERSON: Ha	rry B. Davis	ş	EXT# 6	52926		

EXAMINER:

COVER LETTER

4 - 40

TO: New Filing Section Division of Corporations	
SUBJECT: Fleurchem, Inc.	
Name of corporation - must include suffix	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florid "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:	
Stephen W. Semian, Esq.	
Name of Person	
Warshaw Burstein, LLP	
Firm/Company	
555 Fifth Avenue, 11th Floor	
New York, NY 10017	
City/State and Zip code	
anilaehoxha@wbcsk.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Anila E. Hoxha Name of Person Area Code & Daytime Telephone Number	
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 Street Courier 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: \$\Boxed{1} \\$70.00 \text{ Filing Fee & } \Boxed{1} \\$78.75 \text{ Filing Fee & } \Boxed{1} \\$87.50 Filing Fee &	
Certificate of Status Certified Copy Certificate of Status Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT RUSINESS IN FLORIDA

	DOSERESS	IN I LORIDA	<u> </u>	
		TATUTES, THE FOLLOWING IS SUBMIT	TĒD TO	NO.
REGISTER A FOI	REIGN CORPORATION TO TRANSACT I	BUSINESS IN THE STATE OF FLORIDA.		←
, Fleurchei	m, Inc.		SS	
(Enter name of co	orporation; must include "INCORPORATED." orp." "Inc," "Co," or "Corp.")	" "COMPANY." "CORPORATION,"	- E. E. S	H
			ORID	8: 29
(If name unavaila	ible in Florida, enter alternate corporate name	adopted for the purpose of transacting business	in Florida)
New York	〈			
(State or country	y under the law of which it is incorporated)	(FEI number, if applicable)		
		Perpetual		
(Date	10, 1984	(Duration: Year corp. will cease to exist or "p	erpetual")	
*	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	Florida, if prior to registration) i02, F.S., to determine penalty liability)		
33 Spragu	ie Avenue, Middletown, N			
	(Principal-office add)			••••
33 Sprague	e Avenue, Middletown, NY			
oo opraga	(Current mailing addr			- Apple
		•		
. Name and street	t address of Florida registered agent: (P.C). Box NOT acceptable)		
Name:	Corporation Service Compa			
Office Address:	1201 Hays Street			
	Tallahassee	. Florida 32301		
	(City)	(Zip code)		
		, ,		
esignated in this a arther agree to co	ed as registered agent and to accept service application, I hereby accept the appointn	ce of process for the above stated corporation as registered agent and agree to act in equive to the proper and complete performing position as registered agent.	this cap	acity. I
		H	arry B. Vice F	D avis Preside
	(Registered agent's sig	mature)		
ne Department of S		not more than 90 days prior to delivery of t ficial having custody of corporate records in		

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

	Rochele Gluck			
	33 Sprague Avenue, Middletown, NY 10940	: ﴿ ﴿	14	
		12.	AON	
e Çhai	rman:	φ. Φ. 24		;
		<u> </u>	7	1
_		107 107 115	%	
ctor: ,		Ş.	ڡ	
_				
ter:				
ss: _				
_				
FFI	CERS			
ent:	Rochele Gluck			
ss: _	33 Sprague Avenue, Middletown, NY 10940			
·-				_
'resid	lent:			
				_
_				
ary:	Rochele Gluck			_
ss:	33 Sprague Avenue, Middletown, NY 10940			_
rer:	Rochele Gluck			_
ss: _	33 Sprague Avenue, Middletown, NY 10940			
E: If	necessary, you may attach an addendum to the application listing additional officers and/or	directors.		_
e an	Signature of Director or Officer or of director signing this document (and who is listed in number 12 above) affirms that the fad that he or she is aware that false information submitted in a document to the Department of the felony as provided for in s.817.155, F.S			-
	Rochele Gluck , President			
	(Typed or printed name and capacity of person signing application)			

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of FIEURCNOM, INC. was filed on 10/10/1984, 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.

The Biennial Statement is past due.



Witness my hand and the official seal of the Department of State at the City of Albany, this 05th day of November two thousand and fourteen.

Anthony Giardina

Executive Deputy Secretary of State

201411060555 * 45