

Nov. 13. 2014 12:03PM

GERALD WEINBERG

No. 4972 of 2

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000264651 3)))



H140002646513ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : GERALD WEINBERG, P.C.
Account Number : I20030000043
Phone : (800) 342-9856
Fax Number : (800) 354-3381

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
ITALIAN DAYS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

YMD 11/14

FILED
14 NOV 13 PM 12:18
RECEIVED
14 NOV 13 PM 3:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

1. Italian Days, 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. 41-2124665

(FEI number, if applicable)

4. January 16, 2004

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. January 1, 2014

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 10706 59th Avenue North, Seminole, FL 33772

(Principal office address)

(Current mailing address)

8. Leisure Travel Services

(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: Anastasia Bizzarri

Office Address: 10706 59th Avenue North

Seminole

(City)

Florida 33772

(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.



(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.

CH 14000 264651 3)

14 NOV 13 PM 12:18

FILED

Nov. 13. 2014 12:03PM

GERALD WEINGERG

CH/40002646513 P. 3

FILED
14 NOV 13 PM 12:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: Anastasia Bizzarri

Address: 10706 59th Avenue North
Seminole, FL 33772

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Anastasia Bizzarri

Address: 10706 59th Avenue North
Seminole, FL 33772

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

X 13. [Signature]
(Signature of Director or Officer listed in number 12 of the application)

14. Anastasia Bizzarri, President

(Typed or printed name and capacity of person signing application)

CH/40002646513

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

I hereby certify, that the Certificate of Incorporation of ITALIAN DAYS, INC. was filed on 01/16/2004, 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.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 12th day of November
two thousand and fourteen.*

Anthony Giardina

Anthony Giardina
Executive Deputy Secretary of State