

F14000004898

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

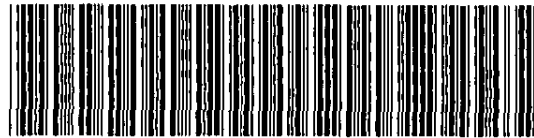
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W14-69707

Office Use Only



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RECEIVED
DEPARTMENT OF STATE
14 NOV 18 AM 19:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 NOV 18 AM 8:25

APPROVAL
AND
FILED

11



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 380301 8017066

AUTHORIZATION :

[Handwritten signature]

COST LIMIT : \$ 70.00

ORDER DATE : November 17, 2014

ORDER TIME : 9:08 AM

ORDER NO. : 380301-005

CUSTOMER NO: 8017066

FOREIGN FILINGS

NAME: IN/PACT CAPITAL, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: _____

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: IN/PACT CAPITAL, INC.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "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:

THOMAS GAINOR, ATTORNEY

Name of Person

MOFFA, GAINOR & SUTTON, PA

Firm/Company

10920 Golden Eagle Ct.

Address

Plantation, FL 33324

City/State and Zip code

tomgainor@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas Gainor

Name of Person

at (954) 334-4444

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center 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:

- ☐ \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 19, 2014

CSC/ COURTNEY

SUBJECT: IN/PACT CAPITAL, INC.
Ref. Number: W1400069707

RESUBMIT

Please give original
submission date as file date.

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

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

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.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 114A00024556

RECEIVED
CORPORATION DIVISION
2014 NOV 19 PM 4:16
TO APPROVAL
SUFFICIENCY OF FILING

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. IN/PACT CAPITAL, 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. DE

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

3. _____

(FEI number, if applicable)

4. 11/05/2014

(Date of incorporation)

5. perpetual

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

6. 11/17/2014

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

7. 10920 Golden Eagle Ct., Plantation, FL 33324

(Principal office address)

10920 Golden Eagle Ct., Plantation, FL 33324

(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Thomas Gainor

Office Address: 10920 Golden Eagle Ct.

Tallahassee

(City)

Plantation

Florida

(Zip code)

32301-33324

9. 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.

Thomas Gainor

By: _____

(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.

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14 NOV 18 AM 8:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

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

14 NOV 18 AM 8:25

A. DIRECTORS

Chairman: AREF ALTAWAN
Address: 7512 DR. Phillips Blvd., Suite 50-410
ORLANDO, FL 32819

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: AREF ALTAWAN
Address: 7512 DR. Phillips Blvd., Suite 50-410
ORLANDO, FL 32819

Vice President: THOMAS GARNON
Address: 10920 Golden Eagle Ct
Plantation, FL 33324

Secretary: THOMAS GARNON

Address: SAME AS ABOVE

Treasurer: AREF ALTAWAN

Address: SAME AS ABOVE

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

12. Thomas Garnon
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. THOMAS GARNON, Secretary
(Typed or printed name and capacity of person signing application)

Delaware

The First State

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AND
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PAGE 1
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

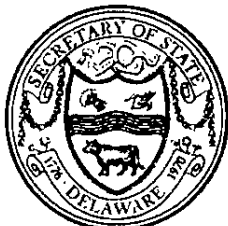
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IN/PACT CAPITAL, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTEENTH DAY OF NOVEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IN/PACT CAPITAL, INC." WAS INCORPORATED ON THE FIFTH DAY OF NOVEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

5633984 8300

141421208



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

Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 1872976

DATE: 11-17-14