

F14000004902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

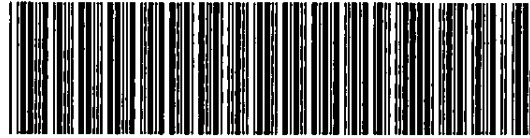
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

W14000062892



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DIVISION OF CORPORATIONS

NOV 20 2014

T. SCOTT



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 15, 2014

SCOTT FINK
BARRY-OWEN CO., INC.
5625 SMITHWAY STREET
LOS ANGELES, CA 90040

SUBJECT: BARRY-OWEN CO., INC.
Ref. Number: W14000062892

We have received your document for BARRY-OWEN CO., 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):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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: 014A00022072

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: BARRY-OWEN CO., 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:

SCOTT FINK

Name of Person

BARRY-OWEN CO., INC.

Firm/Company

5625 SMITHWAY STREET

Address

LOS ANGELES CA 90040

City/State and Zip code

ELEANOR@BARRYOWEN.COM

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

For further information concerning this matter, please call:

SCOTT FINK

Name of Person

at (800) 682-6682 / 323-724-4800

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

**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. BARRY-OWEN CO., 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. CALIFORNIA 3. 95-4136765
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. JANUARY 1, 1988 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 5625 SMITHWAY STREET LOS ANGELES CA 90040
(Principal office address)

56625 SMITHWAY STREET LOS ANGELES CA 90040
(Current mailing address)

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

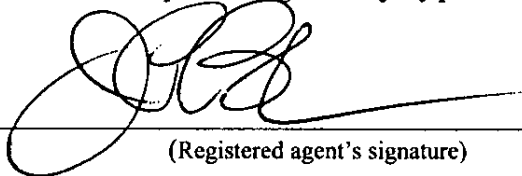
Name: JOSEPH P. BONK

Office Address: 338 PARQUE DR. UNIT E

ORMOND BEACH, Florida 32174
(City) (Zip code)

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.


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

A. DIRECTORS

Chairman: SCOTT FINK

Address: 5625 SMITHWAY STREET

LOS ANGELES CA 90040

Vice Chairman: BRIAN FINK

Address: 5625 SMITHWAY STREET

LOS ANGELES CA 90040

Director: BETH FINK

Address: 5625 SMITHWAY STREET

LOS ANGELES CA 90040

Director: _____

Address: _____

B. OFFICERS

President: SCOTT FINK

Address: 5625 SMITHWAY STREET

LOS ANGELES CA 90040

Vice President: _____

Address: _____

Secretary: BRIAN FINK

Address: 5625 SMITHWAY STREET LOS ANGELES CA 90040

Treasurer: BETH FINK

Address: 5625 SMITHWAY STREET LOS ANGELES CA 90040

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

12. Scott Fink

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. SCOTT FINK (President)

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

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State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

BARRY-OWEN CO., INC.

FILE NUMBER: C1426059
FORMATION DATE: 01/04/1988
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of November 07, 2014.

Debra Bowen

DEBRA BOWEN
Secretary of State