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TALLAHASSEE, FLORIDA

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AND
FILED

1/14

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Design Management Services, 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:

Michelle Raigosa

Name of Person

Design Management Services

Firm/Company

5333 Collins Avenue #701

Address

Miami Beach, FL 33140

City/State and Zip code

michelle@designmanagementservices.com

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

For further information concerning this matter, please call:

Michelle Raigosa at (954) 993-1555

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

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. **Design Management Services, Inc.**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Design Management Services

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **New Jersey** 3. **20-3345123**

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

(FEI number, if applicable)

4. **08/16/2005**

(Date of incorporation)

5. _____
(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. **2150 Hwy 35, Sea Girt, New Jersey 08750**

(Principal office address)

5333 Collins Avenue #701, Miami Beach, FL 33140

(Current mailing address)

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

Name: **Michelle Raigosa**

Office Address: **5333 Collins Ave #701**

Miami Beach

(City)

, Florida **33140**

(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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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

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Chairman: n/a

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TALLAHASSEE, FLORIDA

Address: _____

Vice Chairman: n/a

Address: _____

Director: n/a

Address: _____

Director: n/a

Address: _____

B. OFFICERS

President: Michelle Raigosa (Cottrell)

Address: 5333 Collins Avenue #701

Miami Beach FL 33140

Vice President: n/a

Address: _____

Secretary: n/a

Address: _____

Treasurer: n/a

Address: _____

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

12. 

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. Michelle Raigosa

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

NEW JERSEY DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES

APPROVED
AND
FILED

CERTIFICATE OF INC, (PROFIT)

DESIGN MANAGEMENT SERVICES INC.

0400577852

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The above-named DOMESTIC PROFIT CORPORATION was duly filed in accordance with New Jersey state law on 06/02/2013 and was assigned identification number 0400577852. Following are the articles that constitute its original certificate.

1. Name:

DESIGN MANAGEMENT SERVICES INC.

2. Registered Agent:

MICHELLE COTTRELL

3. Registered Office:

2150 HWY 35
SUITE 250
SEA GIRT, NJ 08750

4. Business Purpose:

Management Consulting

5. Stock:

1

6. First Board of Directors:

MICHELLE COTTRELL
2150 HWY 35 SUITE 250
SEA GIRT, NJ 08750

7. Incorporators:

MICHELLE COTTRELL
2150 HWY 35 SUITE 250
SEA GIRT, NJ 08750

8. Main Business Address:

2150 HWY 35
SUITE 250
SEA GIRT, NJ 08750

Signatures:

MICHELLE COTTRELL

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
SHORT FORM STANDING**

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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DESIGN MANAGEMENT SERVICES INC.

0400577852

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 2, 2013.

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 that the registered agent and registered office are:

*Michelle Cottrell
2150 Hwy 35
Suite 250
Sea Girt, NJ 08750*



Certification# 135030002

*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed my
Official Seal at Trenton, this
30th day of January, 2015*

*Andrew P Sidamon-Eristoff
State Treasurer*

Verify this certificate at
https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp