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## **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: Big Tony & Chopp Shop, 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:
Mr- Authory Stavita Name of Person
Name of reison
Big Tony's Chopp Shop, Inc.
1405 SW 10th Avenue, Rompano Beach, FL 33069
Pompano Beach, Florida 330/e9  City/State and Zip code
City/State and Zip code  anthoxy - starita @ yahoo . com ; doug - ciprians la & egmail. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Douglas A. Cipriano at 708 755-3200 ext-30   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 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 & □ \$78.75 Filing Fee & □ \$78.75 Filing Fee,  Certificate of Status Certified Copy 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. BIG TONY'S CHOPP SHOP INC.

(Enter name of corporation; must include "TNCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") Brg Tony's Choppers, Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. Illinois

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

4. May 7, 2009

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual") Not Applicable - Anticipated Feb. 1, 2015

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 1405 SW 10th Avenue Pompano Beach, FL 33069
(Principal office address) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Ms. Barbara A. Ray Name: 10320 Sandal Foot W., Suite 6 Office Address: Boca Raton , Florida 33428 (City) (Zin 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. annala

(Registered agent's signature)

under the law of which it is incorporated.

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

11. Name	s and business addresses of officers and/or directors:
A. DIREC	
Chairman:	Anthony Starita
Address: _	Anthony Starita 1405 SW 10th Avenue, Pompano Beach, FL 33069
Vice Chairn	nan:
Address:	
Director: _	`
Address:	
Director: _	
Address:	
B. OFFIC President: Address:	
Vice Preside	ent:
Address:	
	Anthony Starita
	1405- Sw 10th Avenue, Pompano Beach, Florida 33069 Anthony Starita
Address:	1405 SW 10th Avenue, Pompano Beach, Florida 33069
NOTE: lf:	necessary, you may attach an addendum to the application listing additional officers and/or directors.
are true and a third degre	Signature of Director or Officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein that he or she is aware that false information submitted in a document to the Department of State constitutes ee felony as provided for in s.817.155, F.S.
13. <u>M</u> M	(Typed or printed name and capacity of person signing application)

File Number

6654-276-9



## To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

BIG TONY'S CHOPP SHOP, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MAY 07, 2009, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



Authentication #: 1502103076

the State of Illinois, this 21ST day of JANUARY A.

A.D.

2015

Desse Whi

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of

Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE