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Florida Department of State  
Division of Corporations  
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Division of Corporations  
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Account Name : C T CORPORATION SYSTEM  
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FOREIGN PROFIT/NONPROFIT CORPORATION  
Abnox Corporation

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**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** ABNOX Corporation

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:

Rebecca Saferstein, Paralegal

Name of Person

Arnall Golden Gregory LLP

Firm/Company

171 17th Street, NW, Suite 2100

Address

Atlanta, GA 30363

City/State and Zip code

tycho.stahl@agg.com

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

For further information concerning this matter, please call:

Rebecca Saferstein, Paralegal

at ( 404 ) 870-5604

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. ABNOX Corporation  
(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. Delaware 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 01/12/2015 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 1920 E. Hallandale Beach BLVD #PH-3, Hallandale Beach, FL, 33009  
(Principal office address)  
1920 E. Hallandale Beach BLVD #PH-3, Hallandale Beach, FL, 33009  
(Current mailing address)

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
(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.*

C T Corporation System  
By:  Nathan S. Giffin Asst. Secretary  
(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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SEARCHED INDEXED SERIALIZED FILED

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

A. DIRECTORS

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Pablo Bernasconi

Address: 1920 E. Hallandale Beach BLVD #PH-3, Hallandale Beach, FL 33009

Director: Benjamin Iseli

Address: 1920 E. Hallandale Beach BLVD #PH-3, Hallandale Beach, FL 33009

B. OFFICERS

President: Pablo Bernasconi

Address: 1920 E. Hallandale Beach BLVD #PH-3, Hallandale Beach, FL 33009

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Benjamin Iseli

Address: 1920 E. Hallandale Beach BLVD #PH-3, Hallandale Beach, FL 33009

Treasurer: Matthias Iseli

Address: 1920 E. Hallandale Beach BLVD #PH-3, Hallandale Beach, FL 33009

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. Pablo Bernasconi, President  
(Typed or printed name and capacity of person signing application)

**ATTACHMENT TO  
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA  
FOR  
ABNOX CORPORATION**

**11.**

**Director: Matthias Iseli**

**Address: 1920 E. Hallandale Beach BLVD #PH-3, Hallandale Beach, Fl, 33009**

# Delaware

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## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ABNOX CORPORATION" 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 TWENTY-FIFTH DAY OF MARCH, A.D. 2015.

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

5660323 8300

150410336

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 2234382

DATE: 03-25-15