

F15000002059

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

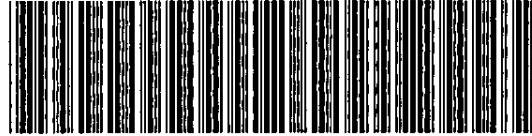
(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 MAY 12 AM 11:52

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AND
FILED

Handwritten signature

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Custom Ts
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:

Nir Shpigel
Name of Person
Custom Ts Inc.
Firm/Company
70 Oak St Unit 101
Address
Norwood NJ, 07648
City/State and Zip code
Customtsinc@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rey Martinez at (201) 750-5181
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

* \$100 check on file
17112



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 4, 2015

NIR SHPIGEL
CUSTOM T'S INC
70 OAK STREET UNIT 101
NORWOOD, NJ 07648

SUBJECT: CUSTOM T'S, LLC
Ref. Number: W15000031155

We have received your document for CUSTOM T'S, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN LLC, but your entity is a FOREIGN CORPORATION. Please complete and return the enclosed blank form(s).

Please return 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) 245-6051.

Stacey M Mason
Regulatory Specialist II

Letter Number: 315A00009075

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

Custom Ts' FI Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New Jersey 3. 270.204.821
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 4.22.2009 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. 70 Oak St. Unit 101 Norwood NJ 07648
(Principal office address)

70 Oak St Unit 101 Norwood NJ 07648
(Current mailing address)

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

Name: David Alfassi - Florida Manager

Office Address: 10561 NW 18th Drive
Plantation, Florida 33322
(City) (Zip code)

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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.

David Alfassi
(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.

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

A. DIRECTORS

Chairman: Nir Shpigel

Address: 70 Oak St. Unit 101
Norwood NJ 07048

Vice Chairman: Rey Martinez

Address: 70 Oak St. Unit 101
Norwood NJ 07048

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: _____

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

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. Nir Shpigel

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

APPROVED
AND
FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
LONG FORM STANDING WITH OFFICERS AND DIRECTORS

APPROVED
AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CUSTOM T'S INC

0101000709

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 April 22, 2009.

As of the date of this certificate, said business continues as an active business in the State of New Jersey. Annual Reports are outstanding for the following year(s):

2014

I further certify that the registered agent and registered office are:

*Nir Shpigel
904 Broadwalk
Ocean City, NJ 08226*

I further certify that the incorporator is:

*Nir Shpigel
904 Broadwalk
Ocean City, NJ 08226*

I further certify that as of the date of this certificate, the following were listed as officers/directors of this business on the last Annual Report filed in this office on: April 2, 2013.

President

*Nir Shpigel
904 Broadwalk
Ocean City, NJ 08226*

**STATE OF NEW JERSEY
DEPARTMENT OF THE TREASURY
DIVISION OF REVENUE AND ENTERPRISE SERVICES
LONG FORM STANDING WITH OFFICERS AND DIRECTORS**

CUSTOM T'S INC

0101000709



Certification# 136010959

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

*IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed my
Official Seal at Trenton, this
21st day of April, 2015*

*Andrew P Sidamon-Eristoff
Acting State Treasurer*

APPROVED
AND
FILED

15 MAY 12 AM 11:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA