

F15000004404

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

608 W15-65717

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15 OCT - 1 AM 5:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 05 2015

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 2, 2015

MELISSA MIGUEL
333 SE 2ND AVENUE STE 2000
MIAMI, FL 33131

SUBJECT: BE ONE SOLUTIONS AMERICAS INC.
Ref. Number: W15000065717

We have received your document for BE ONE SOLUTIONS AMERICAS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 815A00020903

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DEPARTMENT OF STATE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: be one solutions Americas 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:

Melissa Miguel

Name of Person

be one solutions Americas Inc.

Firm/Company

333 SE 2nd Avenue, Suite 2000

Address

Miami, Florida 33131

City/State and Zip code

melissa.miguel@beonesolutions.com

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

For further information concerning this matter, please call:

Melissa Miguel

305

9891324

at ()

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration 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

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TALLAHASSEE, FLORIDA

**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. bc one solutions Americas Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. Pennsylvania 3. 45-3026689
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 09/01/2011 5. _____
(Date of incorporation) (Date of duration, if other than 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. 333 SE 2nd Avenue, Suite 2000, Miami, FL 33131
(Principal office address)
- _____ (Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Melissa Miguel
Name: _____
18845 NW 82nd Ct
Office Address: _____
Hialeah 33015
_____, Florida _____
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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.

Melissa Miguel
(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: Uzi Halfon

Address: Bahnhofstrasse 11
6300 Zug, Switzerland

Vice Chairman: Rainer Vischer

Address: Bahnhofstrasse 11
6300 Zug Switzerland

Director: Uzi Halfon

Address: Bahnhofstrasse 11
6300 Zug, Switzerland

Director: Rainer Vischer

Address: Bahnhofstrasse 11
6300 Zug, Switzerland

B. OFFICERS

President: Uzi Halfon

Address: Bahnhofstrasse 11
6300 Zug Switzerland

Vice President: Rainer Vischer

Address: Bahnhofstrasse 11
6300 Zug Switzerland

Secretary: James H. Druschel

Address: 100 Veka Drive, Fombell, PA 16123

Treasurer: James H. Druschel

Address: 100 Veka Drive, Fombell, PA 16123

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

12. Mario R Candido
Signature of Director or Officer

09/25/2014

The officer or director signing this document (and who is listed in number 11 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. Mario R Candido, Vice President of Business Development

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

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TALLAHASSEE, FLORIDA

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF STATE

09/17/2015

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

be one solutions Americas Inc.

is duly registered as a Pennsylvania Business Corporation under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set
my hand and caused the Seal of the Secretary's
Office to be affixed, the day and year above written

Pedro A. Contes

Secretary of the commonwealth

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TREASURER
CLERK

Certification Number: TSC150917080028-1

Verify this certificate online at <http://www.corporations.pa.gov/orders/verify.aspx>