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Chs



October 5, 2015

ANDREW CIARNIELLO 5001 217TH ST BAYSIDE, NY 11364

SUBJECT: C THREE ARCHITECTURE + DESIGN, P.C.

Ref. Number: W15000059346

We have received your document for C THREE ARCHITECTURE + DESIGN, P.C. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 115A00018956

COVER LETTER

TO:	Registration Section Division of Corporation	ns		
CUDI	C THREE ARCH	ITECTURE + DESIGN,	P.C.	
SUBJ	ECI:	Name of corporation	n - must include suffix	
Dear S	Sir or Madam:			
"Certi		Certificate of Good Sta	r Authorization to Transa anding" and check are sub ness in Florida.	
Please	return all correspondence	e concerning this matt	er to the following:	
Andre	w Ciarniello			
	· · · · · · · · · · · · · · · · · · ·	Name o	f Person	
C THE	REE ARCHITECTURE + D	ESIGN, P.C.		
		Firm/Co	mpany	
5001 2	17th Street			
		Add	ress	
Baysid	le, NY 11364			
	·	City/State	and Zip code	
aciarni	iello@c3architecture.com			
	E-m	ail address: (to be used	I for future annual report	notification)
For fu	rther information concern	ning this matter, please	call:	
Lee Henderson 917		573 5978		
	Name of Person	at (Area Co	de Daytime Telep	phone Number
	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns Circle	MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7
Enclos	sed is a check for the foll	owing amount:		
\$ \$70		78.75 Filing Fee & ertificate of Status	□ \$78.75 Filing Fee & Certified Copy	S87.50 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.

	corporation; must include "INCORPORATI Corp," "Inc," "Co," or "Corp.")	ΞD,	' "COMPANY	," "CORPORATION,"		-
(If name unavai	lable in Florida, enter alternate corporate na	me	adopted for the	purpose of transacting business	in Florida)	-
New York 2.		3	Alla			
	ry under the law of which it is incorporated	- <i>J.</i>)	14/11	(FEI number, if applicable)		-
06/02/2003		5	Perpetual			
4(Dat	e of incorporation)	٥.	(Dat	e of duration, if other than perpet	ual)	-
c HDoor is	earctration					
7150 West 28th S	(SEE SECTIONS 607.1501 & 60 treet, Suite 501, New York, NY 10001		oal office addre			-
	(Current m	ailii	ng address, if d	ifferent)	<u> </u>	-
8. Name and stre	ect address of Florida registered agent:	(P,0	D. Box <u>NOT</u>	acceptable)	15 NOV 25	٠ ٣٠٠
Name:	InCorp Services, Inc.			3.18 3.18	~<	4.2
					의 공	
Office Address:	17888 67th Court North			_0	<u>्</u> स्	•
Office Address:	17888 67th Court North Loxahatchee		 , Florid	33470	5: 3 a	•

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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: Vice Chairman: __ Address: Director: Address: Director: Address: _ **B. OFFICERS** Salvatore Croce President: 59 Andrew Road Address: Manhasset, NY 11030 Andrew Ciarniello Vice President: 5001 217th Street Address: Bayside, NY 11364 Address: _ Address: ___ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer 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. Andrew Ciarniello , VICE - PRESIDENT

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of C THREE ARCHITECTURE + DESIGN, P.C. was filed on 06/02/2003, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

15 NOV 25 PM 5: 38
SLORETARY OF STATE
TABLAHASSEE, FLORID

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 22nd day of September two thousand and fifteen.

Executive Deputy Secretary of State

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