

F15000005707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

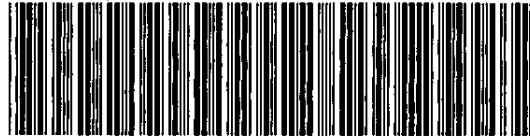
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Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12/29/15--01038--009 \*\*78.75

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15 DEC 29 PM 12:31  
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TALLAHASSEE, FLORIDA

DEC 30 2015

N. CAUSSEAU

# SPENCER T. MALYSIAK

## LAW CORPORATION

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File Number: 5584.15

December 28, 2015

Florida Department of  
State Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Medami, Inc.

Dear Clerk:

Please find enclosed the Application by Foreign Corporation for Authorization to Transact Business in Florida. We have also included the original Certificate of Status as we received it the State of California Secretary of State, along with a check in the amount of \$78.75, for filing fee and Certified Copy fee.

If you have additional questions, please feel free to call our office.

Very truly yours,

  
RICHARD D. SHOEMAKER-MOYLE

Enclosures:

Cover Letter

Application by Foreign Corporation for Authorization to Transact Business In Florida.

Certificate of Status

Check in the amount of \$78.75

12-28-15- Ltr. SOS of Florida

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

Medami, Inc.

**SUBJECT:**

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:

Spencer Malysiak

Name of Person

Spencer T. Malysiak Law Corporation

Firm/Company

3500 Douglas Blvd., Suite 200

Address

Roseville, California 95661

City/State and Zip code

spencer@malysiaklaw.com

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

For further information concerning this matter, please call:

Spencer Malysiak

916

788-1020

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

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

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. State of California 3. 68-0112779  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/03/1986 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. 749 Galleria, Roseville, California 95678  
(Principal office address)

\_\_\_\_\_ (Current mailing address, if different)

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

Name: Carlos E. Mosto  
Office Address: 2803 SW 36th Terr  
Cape Coral, Florida 33914  
(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.*



(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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15 DEC 29 PM 12:31  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: Carlos E. Mosto

Address: 2803 SW 36th Terr

Cape Coral, Florida 33914

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

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15 DEC 29 PM 12:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**B. OFFICERS**

President: Carlos E. Mosto

Address: 2803 SW 36th Terr

Cape Coral, Florida 33914

Vice President: Carlos E. Mosto

Address: 2803 SW 36th Terr

Cape Coral, Florida 33914

Secretary: Carlos E. Mosto

Address: 2803 SW 36th Terr, Cape Coral, Florida 33914

Treasurer: Carlos E. Mosto

Address: 2803 SW 36th Terr, Cape Coral, Florida 33914

**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 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.317.155, F.S.

13. Carlos E. Mosto, President

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

**State of California**  
**Secretary of State**

**CERTIFICATE OF STATUS**

**ENTITY NAME:**

**MEDAMI, INC.**

**FILE NUMBER:** C1545808  
**FORMATION DATE:** 11/03/1986  
**TYPE:** DOMESTIC CORPORATION  
**JURISDICTION:** CALIFORNIA  
**STATUS:** ACTIVE (GOOD STANDING)

**FILED**  
15 DEC 29 PM 12:32  
SECRETARY OF STATE  
SACRAMENTO, CALIFORNIA

I, ALEX PADILLA, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State of  
California.

No information is available from this office regarding the financial  
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of  
California this day of December 14, 2015.

*Alex Padilla*

**ALEX PADILLA**  
Secretary of State