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155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

02-24-16

NAME:

COLUSSI AWS, INC.

TYPE OF FILING: FOREIGN QUAL

COST:

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RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

**AUTHORIZATION: ABBIE/PAUL HODGE** 

## 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.

	ble in Florida, enter alternate corporate name ad	opted for the purpose of transact	ing business in Florida)
Delaware	3	(FBI number, if	
(State or countr 11/12/2014			
(Date	of incorporation)	(Date of duration, if other	er than perpetual)
		_	<u></u>
	(Principal	office address)	
		address, if different)	752
Name and stree	et address of Florida registered agent: (P.O. Cinotti LLP	Box NOT acceptable)	
Name:			in A A
fice Address:	66 WEST FLAGLER, SUITE 1002		2u SSE
	MIAMI	33130 , Florida(Zip code)	OF S
	(City)	(Zip code)	RE 1: 5
Registered age	ent's acceptance: ed as registered agent and to accept service		ted corporation at the p gree to act in this capac

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.

(Registered agent's signature)

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: Vice Chairman: ANDREA COLUSSI Director: VIA VALCUNSAT, 9 - 33072 CASA DELLA DELIZIA - ITALY Address: PAOLO ZANOTTI Director: 1137 97TH STREET, BAY HARBOR ISLANDS, FL 33154 Address: **B. OFFICERS** ANDREA COLUSSI VIA VALCUNSAT, 9 - 33072 CASA DELLA DELIZIA - ITALY Address: NONE Vice President: Address: FILIPPO CINOTTI Secretary: 11 BROADWAY, STE 368 - NEW YORK, NY 10004 Address: CHIARA COLUSSI VIA VALCUNSAT, 9 - 33072 CASA DELLA DELIZIA - ITALY 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. FILIPPO CINOTTI (SECRETARY) 13. \_

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

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## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "COLUSSI AWS, INC." 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-FOURTH DAY OF FEBRUARY, A.D.

2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COLUSSI AWS,

INC." WAS INCORPORATED ON THE TWELFTH DAY OF NOVEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 201880807

Date: 02-24-16