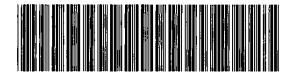
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(Re	equestor's Name)			
(Ad	ldress)			
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
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Office Use Only



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K.SALY EXAMINER FEB 25

#### FLORIDA DEPARTMENT OF STATE Division of Corporations

February 10, 2016

JANET B WEINER LAVERNE INTERIORS INC 8083 VALHALLA DR. DELRAY BEACH, FL 33446

SUBJECT: LAVERNE INTERIORS INC

Ref. Number: W16000010171

We have received your document for LAVERNE INTERIORS INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Karen A Saly Regulatory Specialist II

Letter Number: 916A00002881

### **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: La Veene Interiors Inc				
Name of corporation - must include suffix				
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation for Authorization "Certificate of Existence," or "Certificate of Good Standing" and can above referenced foreign corporation to transact business in Florida.	heck are submitted to register the			
Please return all correspondence concerning this matter to the follo	wing:			
Janet B. Weiner				
Name of Person				
La Verne Interiore	5 INC			
Firm/Company				
8083 Valhalla DR	2			
Address				
DelRAY Beach, F	L 33446			
Bo83 Valhalla DR  Address  DelRAy Beach, FL 33446  City/State and Zip code				
Janetbweiner@gmail.com				
E-mail address: (to be used for future an	nual report notification)			
For further information concerning this matter, please call:				
HAL D. ROSEAL 847 59	17-1970-CPA			
HAL D. ROSEAL 847 59 Janet B. Weiner at (847) 42	03238			
Name of Person Area Code Da	ytime Telephone Number			
STREET/COURIER ADDRESS: M	IAILING ADDRESS:			
e	egistration Section			
<u>-</u>	ivision of Corporations			
•	O. Box 6327			
Tallahassee, FL 32301	allahassee, FL 32314			
Enclosed is a check for the following amount:				
□ \$70,00 Filing Fee □ \$78.75 Filing Fee & <b>1</b> \$78,75 Filing Fee	ing Fee & S87.50 Filing Fee,			
Certificate of Status Certified (	Copy 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.	1. Laverne Interiors INC				
	(Enter name of corporation; must include "INCORPORATED," "CO	MPANY," "CORPORATION,"			
	"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")				
	776				
	(If name unavailable in Florida, enter alternate corporate name adopte	ed for the purpose of transacting business in Florida)			
2.					
	(State or country under the law of which it is incorporated)	(FEI number, if applicable)			
4.	04/28/2000 5.				
••	(Date of incorporation)	(Date of duration, if other than perpetual)			
6.	JAN 1, 2016				
•	(Date first transacted business in Flori	da, if prior to registration)			
	(SEE SECTIONS 607.1501 & 607.1502, F				
7	421 Kelburn Rd #312 D	eerfield, II 80015			
	(Principal offi	ice address)			
	(Principal offi 8083 Valhalla DRIVE E (Current mailing add	DelRay Beach, FL 33446			
	(Current mailing add	ress, if different)			
		<u> 20</u>			
8.	Name and street address of Florida registered agent: (P.O. Box	x NOT acceptable)	173		
	Name: Janet B. Weiner	FEB 2	Section Production		
Ο.	cues Well the Dough	22 888 888	1 []]		
U					
	DelRAY Beach (City)	, Florida 33446 55 v.	Pages, or		
	' (City)	(Zip code) 5 7 7			
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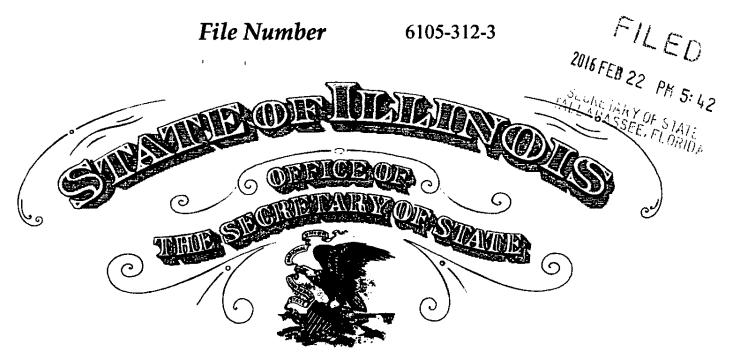
#### 9. Registered agent's acceptance:

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.

(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	2016 FEB 22 PM 5: 42	
Chairman:	- 10/EB 22 5	
Address:	ALLAHASSEE PM 5:42	
	LAHASSER OF STATE	
Vice Chairman:	SURIDZ -	
Address:		
Director:		
Address:		
Auticos		
Director:		
Address:		
Audioss.		
B. OFFICERS		
President: Janet B. Weiner		
Address: 8083 Valhalla DR.		
Dalon Dard 1 83441		
Vice President:		
Address:		
Secretary:		
Address:		
Treasurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the application listing addition	nal officers and/or directors.	
12. Signature of Director or Officer		
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		
a third degree felony as provided for in s.817.155, F.S.		
13. Janet B. Weiner  (Typed or printed name and capacity of person signing appli	cation)	
(,) been of british innite mile subtract) of barron significantly upper		



## To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

LAVERNE INTERIORS, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON APRIL 28, 2000, APPEARS TO HAVE COMPLIED WITH ALL THE **PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.** 



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 19TH day of FEBRUARY A.D. 2016.

Authentication #: 1605000270 verifiable until 02/19/2017
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE