

FILED 0000001032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

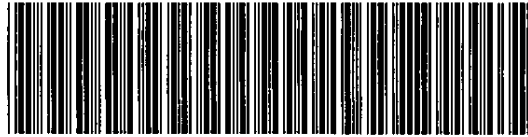
(Document Number)

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

Special Instructions to Filing Officer:

cert. N16-7516

Office Use Only



700281519297

02/01/16--01024--007 \*\*87.50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2016 MAR -3 P 5:05

FILED

MAR 04 2016

S MASON



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 2, 2016

LAWRENCE PRINCIPATO <sup>201</sup>  
1937 E. ATLANTIC BOULEVARD, SUITE ~~200~~  
POMPANO BEACH, FL 33060

SUBJECT: AMERICAN STIMULUS FUNDING CORP.  
Ref. Number: W16000007516

We have received your document for AMERICAN STIMULUS FUNDING CORP. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

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.

Stacey M Mason  
Regulatory Specialist II

Letter Number: 316A00002274

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: American Stimulus Funding Corp  
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:

Lawrence Principato  
Name of Person  
American Stimulus Funding Corp  
Firm/Company  
1937 E. Atlantic Blvd. Suite 201  
Address  
Danbury Pompano Beach, FL 33060  
City/State and Zip code  
lp@stimulusfunding.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lawrence Principato at ( 203 ) 448-9484  
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. American Stimulus Funding Corp.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. New York 3. 80.0463483  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. July 23, 2009 5. JAN 27, 2018  
(Date of incorporation) (Date of duration, if other than perpetual)

6. JAN 15, 2016  
(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1937 E. Atlantic Blvd., Suite 201, Pompano Beach,  
(Principal office address) FL 33060

(Current mailing address, if different)

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

Name: LAWRENCE PRINCIPATO

Office Address: 1937 E. Atlantic Blvd., Suite 201

Pompano Beach

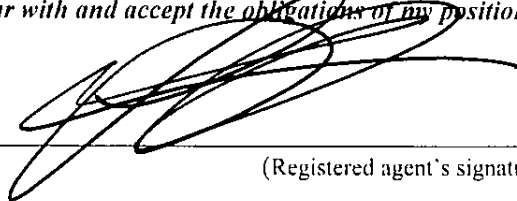
(City)

, Florida 33060

(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.

FILED  
2015 MAR -30 5:05  
SECRETARY OF STATE  
FLORIDA

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

A. DIRECTORS

Chairman: LISA PRINCIPATO

Address: 1937 E. Atlantic Blvd., Suite 201  
Pompano Beach, Florida 33060

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

President: LISA PRINCIPATO

Address: 1937 E. Atlantic Blvd., Suite 201  
Pompano Beach, FL 33060

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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.817.155, F.S.

13. LISA PRINCIPATO

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

FILED  
2016 MAR - 3 P 5:05  
SECRETARY OF STATE  
TAMMASEE, FLORIDA

**State of New York  
Department of State } ss:**

I hereby certify, that the Certificate of Incorporation of AMERICAN STIMULUS FUNDING CORP. was filed on 07/23/2009, 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.



\*\*\*

*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 25th day of February two  
thousand and sixteen.*

*Anthony Scardino*

*Executive Deputy Secretary of State*