F/600000/248

(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:

Office Use Only



300283393043

03/16/16--01001--016 **233.75

15 MAR 15 PH 2: 47

II6 MAR 15 AM 7:5

K.S.ALY EXAMINER MAR 16

SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724 Toll Free: 844-541-6792

DATE: 3-14-16	1.101 12 141
ENTITY NAME: James Pecis Incorporated	WALK IN
ENTITY NAME: Duries recis incorporated	
PLEASE FILE THE ATTACHED AND RETU	RN:
Plain Copy	
Certified Copy	
	· · · · · · · · · · · · · · · · · · ·
PLEASE OBTAIN THE FOLLOWING FOR THE ABO	VE ENTITY:
Document Number:	
Certified Copy of Arts & Amendments	
Certificate of Good Standing	
APOSTILLE'/NOTARIAL CERTIFICATION	V:
COUNTRY OF DESTINATION	
NUMBER OF CERTIFICATES REQUESTED	
TOTAL AMOUNT OWED: 78.75	
CHECK NUMBER: 2351	•
PLEASE CONTACT TINA AT 850-508-1891 FOR ANY PROBLEMS OR INFORM	MATION ON THIS
MATTER.	
Thank you!	
Thank you! Tina Goff, President	

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.

JAMES PECIS I	NCORPORATED		
(Enter name of co "Inc.," "Co.," "Co	rporation; must include "INCORPORATED orp," "Inq," "Co," or "Corp.")	." "COMPANY," "CORPORATION,"	THE TOTAL TO
(If name unavaila	ble in Florida, enter alternate corporate name	e adopted for the purpose of transacting business in Florida	下颚 美口
New York	3	47-2833527	
(State or country January 12, 2015	y under the law of which it is incorporated)	(FEI number, if applicable) Perpetual	
	of incorporation)	(Date of duration, if other than perpetual)	_
6			
3250 NE 1st Ave		in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	_
7	(Princ	cipal office address)	
	(Current mai	ling address, if different)	
8. Name and stree Name:	<u>a address</u> of Florida registered agent: (P James Pecis	P.O. Box NOT acceptable)	
Office Address:	3250 NE 1st Avenue, #809		
Office Address.	Miami	, Florida	
	(City)	(Zip code)	
	ent's acceptance:		

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.

2016 MAR 15 AM 7:52
SLEAH ASSET FOR SERVICE 11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: Vice Chairman: ____ Address: James Pecis Director: 3250 NE 1st Avenue, #809, Miami, Florida 33137 Address: Director: Address: **B. OFFICERS** James Pecis President: 3250 NE 1st Avenue, #809, Miami, Florida 33137 Address: Vice President: ____ James Pecis Secretary: 3250 NE 1st Avenue, #809, Miami, Florida 33137 Address: James Pecis Treasurer: 3250 NE 1st Avenue, #809, Miami, Florida 33137 NOTE: If necessary you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer of 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. James Pecia, President

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

State of New York Department of State State | State

I hereby certify, that the Certificate of Incorporation of JAMES PECIS INCORPORATED was filed on 01/12/2015, 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.

I further certify that no other documents have been filed by such corporation.



201603150281 * 37

Witness my hand and the official seal of the Department of State at the City of Albany, this 14th day of March two thousand and sixteen.

Anthony Giardina Executive Deputy Secretary of State