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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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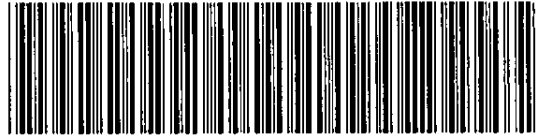
(Business Entity Name)

(Document Number)

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

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

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S MASON

# SUNSHINE CORPORATE FILING OF FLORIDA INC.

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

DATE: 3-29-16

WALK IN

ENTITY NAME: DIVAL SAFETY EQUIPMENT, INC.

**\*\*PLEASE FILE THE ATTACHED AND RETURN:\*\***

☐ Plain Copy

☒ Certified Copy

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY:\*\***

Document Number: \_\_\_\_\_

☐ Certified Copy of Arts & Amendments

☐ Certificate of Good Standing

**\*\*APOSTILLE/NOTARIAL CERTIFICATION:\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL AMOUNT OWED: 78.75

CHECK NUMBER: 2385

PLEASE CONTACT TINA AT 850-508-1891 FOR ANY PROBLEMS OR INFORMATION ON THIS MATTER.

Thank you!

*Tina Goff, President*

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** DIVAL SAFETY EQUIPMENT, INC.

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:

Richard J. Day, Esq.

Name of Person

Barclay Damon LLP

Firm/Company

200 Delaware Avenue, Suite 1200

Address

Buffalo, New York 14202

City/State and Zip code

rstegner@barclaydamon.com

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

For further information concerning this matter, please call:

Ruth A. Stegner

Name of Person

at ( 716 ) 566-1452

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing 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. **DIVAL SAFETY EQUIPMENT, 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. **NEW YORK** 3. **16-1104585**  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. **12/08/1977** 5. **Perpetual**  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. **UPON FILING**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. **1721 Niagara Street, Buffalo, New York 14207**  
(Principal office address)

**1721 Niagara Street, Buffalo, New York 14207**  
(Current mailing address)

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

Name: **United Corporate Services, Inc.**

Office Address: **9200 South Dadeland Blvd., Suite 508**

**Miami**, Florida **33156**  
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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**

Chairman: Charles J. Vallone, Jr.

Address: 1721 Niagara Street, Buffalo, New York 14207

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

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

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

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

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

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

**B. OFFICERS**

President: Charles J. Vallone, Jr.

Address: 1721 Niagara Street, Buffalo, New York 14207

Vice President: Christopher Werner

Address: 1721 Niagara Street, Buffalo, New York 14207

Secretary: Charles J. Vallone, Jr.

Address: 1721 Niagara Street, Buffalo, New York 14207

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 12 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. Christopher Werner, Vice President

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

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SECRETARY OF STATE  
TREASURY FLORIDA

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

I hereby certify, that the Certificate of Incorporation of DIVAL SAFETY EQUIPMENT, INC. was filed on 12/08/1977, 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 the following:

A Certificate of Amendment was filed on 09/10/1987.

A Certificate of Amendment was filed on 12/31/1993.

A Biennial Statement was filed 03/28/1995.

A Biennial Statement was filed 12/09/1997.

A Certificate of Merger was filed on 09/30/1998.

A Biennial Statement was filed 01/06/2000.

A Biennial Statement was filed 11/27/2001.

A Biennial Statement was filed 06/18/2004.

A Biennial Statement was filed 01/18/2006.

A Biennial Statement was filed 12/12/2007.

A Biennial Statement was filed 12/08/2009.

A Biennial Statement was filed 12/20/2011.

A Biennial Statement was filed 01/06/2014.

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



\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 18th day of March  
two thousand and sixteen.*

*Anthony Giardina*

Anthony Giardina  
Executive Deputy Secretary of State