Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000079387 3)))



H160000793873ABC8

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)205-8842

Phone

: (850)878-5368 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

PH 12:

FOREIGN PROFIT/NONPROFIT CORPORATION FLOSS AGENCY INC.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY **EXAMINER**

https://efile.sunbiz.org/scripts/efilcovr.exe

3/30/2016

COVER LETTER

TO:	Registration Section Division of Corp				
erio i	ECT:	FLOSS	A GENC	4 . IN	C.
SUDJ	ECI:		oration - must i		
Dear S	Sir or Madam:	·			
"Certi	ficate of Existence	on by Foreign Corporat " or "Certificate of Go corporation to transact	od Standing" ar	nd check are sub	ct Business in Florida," omitted to register the
Picase	return all correspo	ndence concerning this	s matter to the f	ollowing:	
			ame of Person		
	FLOSS	AGENCY	INC		
·				· · · · · · · · · · · · · · · · · · ·	
	6465	TRANSIT	RD	P0 6	370
			Address		
	EAST	AMHERST	N	1 1408	51
			State and Zip c		
	DIA	NE @ FLOSSI			
		E-mail address: (10 b	e used for futur	e annual report	notification)
For fu	orther information of	concerning this matter,	please cail:		
<u></u>	Name of Persor	ATRESCA at (nca Code	ø & & - S 11S Daytime Telep	hone Number
	STREET/COU Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations B Center Circle		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, 1	Section Orporations 7
Enclo	sed is a check for	the following amount:			,
□ \$1	70.00 Filing Fee	□ \$78.75 Filing Fee Certificate of State		5 Filing Fee & Ted Copy	S87.50 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. <u>F</u> L	loss Agency	INC	•				
	poration; must include "INCORPOR p," "Inc," "Co," or "Corp.")	ATED," "COMP	ΛΝΥ," '	CORPORATION,"			
(If name unavailab	le in Florida, enter alternate corporat	name adopted fo	or the pur	pose of transacting bus	siness in Flo	rida)	
2.	NY under the law of which it is incorpora	3	16-	1222439	<u> </u>		
		ted)	(FEI number, if applied	ble)		
405/1	1/1984	5	Perp	etual	····		
(Date o	fincorporation)		(Date of	duration, if other than	perpetual)		
6	11 be in June 20						
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)							
7. 64	65 TRANSIT RO	2 4	€. A	MHERST L	41 PC	051	
		(Principal office a	address)				
P	O Box 370	ع	AST_	AMHERST,	NY 1	405.	1
	(Curre	nt mailing address	, if differ	ent)	-1 1	201	
						2016 HAR	
8. Name and street	address of Florida registered age	nt: (P.O. Box <u>N</u>	IOT acc	eptable)	12 17 12 17 12 18	The branch of th	ا بيدين * مدينا . و
Name:	NRAI Services, Inc.				68	30	1
Office Address:	1200 South Pinc Island Road	· · · · · · · · · · · · · · · · · · ·			# <u></u>	HH 10: 32	ž
	Plantation, FL 33324	म	lorida		آمر) نسب درجه الآماا	Ģ	•
	(City)			(Zip code)	A ST WE ST	32	
designated in this of	nt's acceptance: d as registered agent and to acce application, I hereby accept the a amply with the provisions of all st amiliar with and accept the obliga	ppointment as r atutes relative t	registere o the pr	ed agent and agree to oper and complete p	o act in thi	s capac	ity. I
	NRAI Sei	vices. Inc.					
Ву	Lui	la Dentité					
<u>.</u>	(Re	pistered agent's sign	nature) L	inda Stauffer, Assistar	nt Secretary	1	

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.

3/30/2016 12:27:16 PM From: To: 8506176383(4/6)

	PILEL
11. Names and business addresses of officers and/or directors:	2016 4
A. DIRECTORS	2016 MAR 30 AM 10: 32
Chairman:	MUNICIPAL TOP 32
Address:	ASSEE TI ASSE
	•
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
Address.	
B. OFFICERS	
Address: 6465 Transit Rd, East Amherst, NY 14051	
6465 Transit Rd. East Amherst, NY 14051	
Address:	
Secretary: DeBORAH FLOSS	
6465 Transit Rd. Fact Amberst NV 14051	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addondum 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) af are true and that he or she is aware that false information submitted in a document to the a third degree felony as provided for in s.817.155, F.S.	
13. JOSEPH M FLOSS, PRES	
(Typed or printed name and capacity of person signing applica	tion)

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of FLOSS AGENCY INC. was filed on 05/11/1984, under the name of JOSEPH FLOSS INC., 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.

A Certificate of Amendment JOSEPH FLOSS INC., changing its name to FLOSS AGENCY INC. , was filed 02/23/2000.

The Biennial Statement is past due.



201603290645 · EZ

Witness my hand and the official seal of the Department of State at the City of Albany, this 28th day of March two thousand and sixteen.

Anthony Giardina
Executive Deputy Secretary of State

ZOIG MAR 30 AM IO: 32