

FILED 000000 2036

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

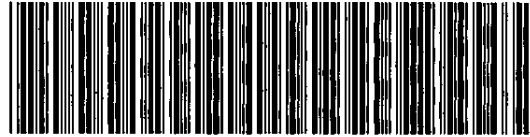
(Business Entity Name)

(Document Number)

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

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04/18/16--01027--011 \*\*125.00

FILED  
15 MAY -2 AM 10:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAY 11 4 2016  
J. HARRIS

2016-0111

## COVER LETTER

**TO:** Registration Section  
Division of Corporations  
NEUROMORE INC.

**SUBJECT:** \_\_\_\_\_  
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:  
Christopher A. DiSchino, Esq.

_____	Name of Person
DiSchino & Company, PLLC	
_____	Firm/Company
4770 Biscayne Blvd., Suite 1280	
_____	Address
Miami, Florida 33137	
_____	City/State and Zip code
christopher@dsmiami.com	
_____	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Christopher A. DiSchino	786	581-2542
_____	at ( _____ )	_____
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:

- |  |  |   |   |
|--|--|---|---|
| <input checked="" type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|--|--|---|---|



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 20, 2016

CHRISTOPHER A DISCHINO  
DISCHINO & SCHAMY, PLLC  
4770 BISCAYNE BOULEVARD, SUITE 1280  
MIAMI, FL 33137

(SUBJECT: NEUROMORE INC.  
Ref. Number: W16000029132)

RECEIVED  
2016 MAY - 2 PM 5:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for NEUROMORE INC. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FOREIGN LLC, but your entity is a FOREIGN CORPORATION. Please complete and return the enclosed blank form(s).

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document number of the name conflict is L14000012921.

The registered agent must sign accepting the designation.

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.

Jenna D Harris  
Regulatory Specialist II

Letter Number: 216A00008137

FILED  
16 MAY - 2 AM 10:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DISCHINO & SCHAMY, PLLC**  
4770 Biscayne Blvd., Suite 1280  
Miami, Florida 33137  
(786) 581-2542

April 26, 2016

**VIA U.S. MAIL**

Florida Department of State  
Division of Corporations  
Attn: Jenna D. Harris  
P.O. Box 6327  
Tallahassee, Florida 32314

Ref. No: W16000029132; Letter No. 21A600008137  
Subject: Neuromore Inc. (the "Entity")

FILED  
16 MAY -2 AM 10:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dear Ms. Harris:

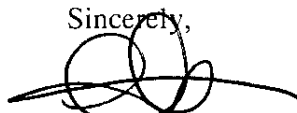
My office represents Neuromore Inc. I am in receipt of your letter dated April 20, 2016 stating that you received a check in the amount of \$125.00 but that the form for a FOREIGN CORPORATION should have been submitted rather than the form for a FOREIGN LLC. Attached please find the correct form, together with a copy of the Entity's Certificate of Good Standing in Delaware.

Moreover, please accept this letter as confirmation that Neuromore, LLC (Document No. L14000012921) was converted to a Delaware Entity on February 11, 2016. Thus, Neuromore, LLC is Neuromore Inc. The Members and Managers of Neuromore, LLC are the same Directors and Officers for Neuromore Inc. Neuromore, LLC hereby gives its consent to use the name NEUROMORE INC and to file and register NEUROMORE INC, as a foreign corporation registered to do business in Florida, under Document No. W16000029132.

Finally, in light of the fact that the filing fee for a Foreign Corporation to qualify to do business in Florida is only \$70.00, we kindly request that the difference in the fees paid (\$55.00) be reimbursed to the law offices of DiSchino & Schamy, PLLC, at the address listed above.

Thank you in advance for your prompt consideration of this matter. If you have any questions in regard to the foregoing, please feel free to contact the above law offices or by e-mail at [christopher@dsnmiami.com](mailto:christopher@dsnmiami.com).

Sincerely,



Christopher A. DiSchino

**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.*

NEUROMORE INC.

1. \_\_\_\_\_  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. \_\_\_\_\_ 3. \_\_\_\_\_  
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)  
DELAWARE 46-4621662  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. \_\_\_\_\_ 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)  
02/11/2016
6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  
350 Lincoln Road, 2nd Floor, Miami Beach, Florida 33139
7. \_\_\_\_\_  
(Principal office address)
- \_\_\_\_\_ (Current mailing address, if different)

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

Name:

DiSchino & Schamy, PLLC

Office Address:

4770 Biscayne Blvd., Suite 1280

Miami, Florida


33137

(City)

(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.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Patrick Hilsbos

Chairman: \_\_\_\_\_  
350 Lincoln Road, 2nd Floor  
Address: \_\_\_\_\_  
Miami Beach, Florida

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

Michael Hilsbos  
Director: \_\_\_\_\_  
350 Lincoln Road, 2nd Floor  
Address: \_\_\_\_\_  
Miami Beach, Florida 33139

Benjamin Jillich  
Director: \_\_\_\_\_  
350 Lincoln Road, 2nd Floor  
Address: \_\_\_\_\_  
Miami Beach, Florida 33139

**B. OFFICERS**

Patrick Hilsbos

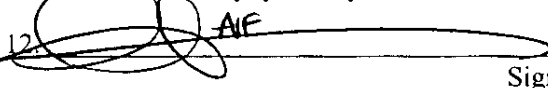
President: \_\_\_\_\_  
350 Lincoln Road, 2nd Floor  
Address: \_\_\_\_\_  
Miami Beach, Florida 33139

Michael Hilsbos  
Vice President: \_\_\_\_\_  
350 Lincoln Road, 2nd Floor  
Address: \_\_\_\_\_  
Miami Beach, Florida 33139

Patrick Hilsbos  
Secretary: \_\_\_\_\_  
350 Lincoln Road, 2nd Floor, Miami Beach, Florida 33139  
Address: \_\_\_\_\_

Michael Hilsbos  
Treasurer: \_\_\_\_\_  
350 Lincoln Road, 2nd Floor, Miami Beach, Florida 33139  
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.

Patrick Hilsbos

13. \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

FILED  
16 MAY -2 AM 10:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "NEUROMORE INC." IS DULY INCORPORATED  
UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND  
HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS  
OFFICE SHOW, AS OF THE SIXTH DAY OF APRIL, A.D. 2016.



5961506 8300

SR# 20161943675

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

Authentication: 202104380

Date: 04-06-16