# Flowwa312

(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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FILED

TALES SO LEGELERADES

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 147907 - 4305380

AUTHORIZATION : Spelle Man

COST LIMIT : \$ 70.00

ORDER DATE: May 19, 2016

ORDER TIME : 1:04 PM

ORDER NO. : 147907-005

CUSTOMER NO: 4305380

#### FOREIGN FILINGS

NAME: FIFL PROPERTIES, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: FIFL Properties, Inc.	
Name of corporation	- must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for A "Certificate of Existence," or "Certificate of Good Standabove referenced foreign corporation to transact business	ding" and check are submitted to register the
Please return all correspondence concerning this matter	to the following:
Wendy Z. Greenwood, Esq.	
Name of F	Person
Schenck, Price, Smith & King, LLP	
Firm/Comp	oany
220 Park Avenue, PO Box 991	
Addre	
Florham Park, NJ 07932	
City/State an	The state of the s
wzg@spsk.com	
E-mail address: (to be used for	or future annual report notification $\Sigma$
For further information concerning this matter, please ca	ے مرکب
Wendy Z. Greenwood, Esq. at (973	) 539-1000
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 & Sertified Copy Sertified Copy Certified Copy Certified Copy

## APPLICATION BY FOREIGN CÖRPORATION 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.

"Inc:," "Co.," "Co	rporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	Committee, Combine	
(If name unavaila	ble in Florida, enter alternate corporate name a	adopted for the purpose of transf	acting business in Florida)
Delaware	3.		
(State or country under the law of which it is incorporated)		(FEI number,	if applicable)
November 21, 2014 5.		(Date of duration, if o	
(Date of incorporation)		(Date of duration, if o	ther than perpetual)
· · · · · · · · · · · · · · · · · · ·			~~~
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15		
709 SW St. Lucio	Crescent, Stuart, FL 34994		
	(Princip	pal office address)	
	(Current mailin	ng address, if different)	
Name and street	t <u>åddress</u> of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	
Name:	Corporation Service Company	·····	F. 2
	1201 Hays Street		
	1201 Hays Street	_	III HAY SECRETA
		, Florida 32301	SECRETARY 19
		, Florida 32301 (Zip code)	ING MAY 19 F
ffice Address:  Registered age	Tallahassee (City) ent's acceptance:		
ffice Address:  Registered ago aving been nam	Tallahassee (City) ent's acceptance: ed as registered agent and to accept servi	ice of process for the above s	stated corporation at the p
ffice Address:  Registered age aving been nam esignuted in this rther agree to co	Tallahassee  (City)  ent's acceptance:  ed as registered agent and to accept servi application, I hereby accept the appointn omply with the provisions of all statutes r	ice of process for the above s nent as registered agent and relative to the proper and co	stated corporation at the plagree to act in this capacing the performance of my
ffice Address:  Registered age faving been namesignated in this	Tallahassee  (City)  ent's acceptance:  ed as registered agent and to accept servi application, I hereby accept the appointn	ice of process for the above s nent as registered agent and relative to the proper and co	stated corporation at the plagree to act in this capacing the performance of my
ffice Address:  Registered age faving been namesignated in this arther agree to couties, and I am f	Tallahassee  (City)  ent's acceptance:  ed as registered agent and to accept servi application, I hereby accept the appointn omply with the provisions of all statutes r amiliar with and accept the obligations of	ice of process for the above s nent as registered agent and relative to the proper and co	stated corporation at the parties to act in this capacimplete performance of my gent.
Office Address:  Registered ago laving been namesignated in this arther agree to couties, and I am f	Tallahassee  (City)  ent's acceptance:  ed as registered agent and to accept servi application, I hereby accept the appointn amply with the provisions of all statutes r amiliar with and accept the obligations of	ice of process for the above s nent as registered agent and relative to the proper and co	stated corporation at the p agree to act in this capac aplete performance of my

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. Name	es and business addresses of officers and/or directors:	;
A. DIRE	CTORS	
Chairman:		
Address: _		
_		<u> </u>
Vice Chair	imain:	
Address:		
	Charles Salvatori	
Address: _	709 SW St. Lucie Crescent, Stuart, FL 34994	
Director:		
Address:		
B. OFFI	ICERS	
President:	Charles Salvatori Por Salvatori	
Address:	709 SW St. Lucie Crescent, Stuart, FL 34994	11
_	1 9 1 9 1 9 1 9 1 9 1 9 1 9 1 9 1 9 1 9	
Vice Presid	dent:	0
	LOR 2: 2	
	Su. m	
Secretary:	Charles Salvatori	
Address: _	709 SW St. Lucie Crescent, Stuart, FL 34994	
Treasurer:	Charles Salvatori	
Address: _	709 SW St. Lucie Crescent, Stuart, FL 34994	<del>-</del>
NOTE: 1	If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
12	Thank to alvarty	
are true ar	Signature of Director or Officer er or director signing this document (and who is listed in number 11 above) affirms that the facts stated and that he or she is aware that false information submitted in a document to the Department of State congrect felony as provided for in s.817.155, F.S.	l herein nstitutes
13. Charl	les Salvatori, President	
	(Typed or printed name and capacity of person signing application)	

Page 1

## <u>Delaware</u>

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "FIFL PROPERTIES, 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 NINETEENTH DAY OF MAY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FIFL PROPERTIES,

INC." WAS INCORPORATED ON THE TWENTY-FIRST DAY OF NOVEMBER, A.D.

2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

and core delaware soviau

Authentication: 202348186

Date: 05-19-16