

F16000002629

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

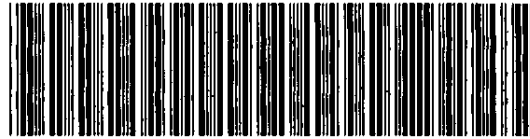
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

cert. W16-38949
waiver letter

Office Use Only



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2016 JUN -9 A 11:06
CLERK OF STATE
TALLAHASSEE, FLORIDA

S Warren
JUN 10 2016



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 26, 2016

JENNIFER R. SMITH, CPA
301 YAMATO ROAD, SUITE 2195
BOCA RATON, FL 33431

SUBJECT: USN NORTH AMERICA, INC.
Ref. Number: W16000038949

We have received your document for USN NORTH AMERICA, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as or not distinguishable from the name of a voluntarily dissolved business entity. This name is not available for the assumption or use by another entity for 120 days after the effective date of the dissolution. The dissolved business entity may provide the Department of State with an affidavit or letter, releasing the name for use to you and affirming they have no intention of revoking the dissolution or you may adopt an alternate name for use in Florida. If you choose to adopt an alternate name, please enter that name in the space provided in number one of the application.

Please provide waiver letter stating that P16000038222 is owned by same people and they have no intention of reinstating that entity, and are releasing the name to be used by the foreign entity.,

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Stacey M Warren
Regulatory Specialist II

Letter Number: 816A00011216



JENNIFER R. SMITH, P.A.
CERTIFIED PUBLIC ACCOUNTANT

301 Yamato Road
Boca Raton, FL 33431
Phone: (561) 997-6797
Fax: (561) 997-6966
www.southflorida-cpa.com

May 27, 2016

Florida Department of State
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: USN North America, Inc.

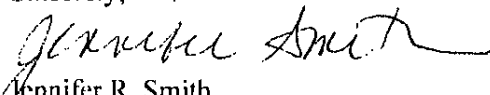
Dear Representative:

Please accept this letter as USN North America, Inc.'s waiver to release the name "USN North America, Inc." from a former Florida profit corporation with registration number P16000038222, to a foreign profit corporation doing business in Florida. The same owners have always owned the corporate name, USN North America, Inc. in Florida and would like to release it so that the company can properly be registered as a foreign corporation doing business in Florida.

USN North America, Inc. is incorporated in Delaware. Accordingly, please find attached the Company's registration with the State of Delaware. The company is in good standing with Delaware.

We appreciate your attention to this matter and if you have any further questions or need additional information, please call me at 561-997-6797.

Sincerely,


Jennifer R. Smith
Certified Public Accountant

cc: Jeanandre Esterhuysen

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: USN NORTH AMERICA, 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:

JENNIFER R. SMITH, CPA

Name of Person

JENNIFER R. SMITH, P.A.

Firm/Company

301 YAMATO ROAD, SUITE 2195

Address

BOCA RATON, FL 33431

City/State and Zip code

JEN@SOUTHFLORIDA-CPA.COM

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

For further information concerning this matter, please call:

JENNIFER SMITH

Name of Person

at (561) 997-6797

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 & 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. USN NORTH AMERICA, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. DELAWARE

(State or country under the law of which it is incorporated)

3. 37-1755778

(FEI number, if applicable)

4. 04/08/2014

(Date of incorporation)

5. _____

(Date of duration, if other than perpetual)

6. 05/04/2016

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

7. 1560 SAWGRASS CORPORATE PARKWAY, FLOOR 4, SUNRISE, FL 33323

(Principal office address)

(Current mailing address, if different)

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

Name: JEANANDRE ESTERHUYSEN

Office Address: 12470 NW 15TH PLACE, #306

SUNRISE

(City)

, Florida 33323

(Zip code)

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SECRETARY OF STATE
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: ALBE GELDENHUYS

Address: 1560 SAWGRASS CORPORATE PARKWAY, FLOOR 4

SUNRISE, FL 33323

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: JURIE BEZUIDENHOUT

Address: 1560 SAWGRASS CORPORATE PARKWAY, FLOOR 4

SUNRISE, FL 33323

Vice President: _____

Address: _____

Secretary: JEANANDRE ESTERHUYSEN

Address: 1560 SAWGRASS CORPORATE PARKWAY, FLOOR 4, SUNRISE, FL 33323

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 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. Jeanandre Esterhuyesen

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

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2016 JUN -9 A 11:06
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 "USN NORTH AMERICA, 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 NINTH DAY OF JUNE, A.D. 2016.



5513516 8300

SR# 20164255552

You may verify this certificate online at 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: 202459099

Date: 06-09-16