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JUN 24 2016

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAM-E-NIK CORP.

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:

Aaron Swimmer, Esq.

Name of Person

Swimmer Law Associates P.A.

Firm/Company

1680 Michigan Avenue - Suite 1014

Address

Miami Beach, FL 33139

City/State and Zip code

ALS@SwimmerLawAssociates.com

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

For further information concerning this matter, please call:

Aaron Swimmer

Name of Person

at (305)

Area Code

535-0808

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. SAM-E-NIK CORP.
(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. New York 3. 55-082723
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. March 6, 2003 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. 3/21/16
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 11217 SW 88 St. # C101 - Miami, FL 33176
(Principal office address)

(Current mailing address, if different)

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

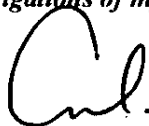
Name: Swimmer Law Associates P.A.

Office Address: 1680 Michigan Avenue - Ste 1014
Miami Beach, Florida 33139
(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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Carlos Lopez Jr.

Address: 11217 SW 88 St. #C101 - Miami, FL 33176

Director: Natalia Lopez

Address: 11217 SW 88 St. #C101 - Miami, FL 33176

B. OFFICERS

President: Carlos Lopez Jr.

Address: 11217 SW 88 St. #C101 - Miami, FL 33176

Vice President: _____

Address: _____

Secretary: Natalia Lopez

Address: 11217 SW 88 St. #C101 - Miami, FL 33176

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. Carlos Lopez Jr. - President

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

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DEPARTMENT OF STATE
FLORIDA

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

I hereby certify, that the Certificate of Incorporation of SAM-E-NIK CORP. was filed on 03/06/2003, 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.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 17th day of June
two thousand and sixteen.*

Anthony Giardina

Anthony Giardina
Executive Deputy Secretary of State

NYS Department of State

Division of Corporations

Entity Information

The information contained in this database is current through June 20, 2016.

Selected Entity Name: SAM-E-NIK CORP.

Selected Entity Status Information

Current Entity Name: SAM-E-NIK CORP.

DOS ID #: 2877815

Initial DOS Filing Date: MARCH 06, 2003

County: QUEENS

Jurisdiction: NEW YORK

Entity Type: DOMESTIC BUSINESS CORPORATION

Current Entity Status: ACTIVE

Selected Entity Address Information

DOS Process (Address to which DOS will mail process if accepted on behalf of the entity)

SAM-E-NIK CORP.

11217 SW 88 STREET C101

MIAMI, FLORIDA, 33176

Chief Executive Officer

NATALIA LOPEZ

11217 SW 88 STREET C101

MIAMI, FLORIDA, 33176

Principal Executive Office

SAM-E-NIK CORP.

11217 SW 88 STREET C101

MIAMI, FLORIDA, 33176

Registered Agent

NONE

This office does not record information regarding the names and addresses of officers, shareholders or directors of nonprofessional corporations except the chief executive officer, if provided, which would be listed above. Professional corporations must include the name(s) and address(es) of the initial officers, directors, and shareholders in the initial certificate of incorporation, however this information is not recorded and only available by viewing the certificate.

***Stock Information**

# of Shares	Type of Stock	\$ Value per Share
200	No Par Value	

*Stock information is applicable to domestic business corporations.

Name History

Filing Date	Name Type	Entity Name
MAR 06, 2003	Actual	SAM-E-NIK CORP.

A **Fictitious** name must be used when the **Actual** name of a foreign entity is unavailable for use in New York State. The entity must use the fictitious name when conducting its activities or business in New York State.

NOTE: New York State does not issue organizational identification numbers.

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