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(Re	questor's Name)	
(Ade	dress)	
(Address)		
(Cit	y/State/Zip/Phon	e #)
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer	
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COVER LETTER

Division of Corporations	
SUBJECT: CL Nationwide Services, Inc.	
	ion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation to "Certificate of Existence," or "Certificate of Good Sabove referenced foreign corporation to transact bus	Standing" and check are submitted to register the
Please return all correspondence concerning this ma	tter to the following:
Janet Colon	
Name	of Person
CL Nationwide Services, Inc.	
Firm/C	ompany
160 Broadway, 3rd Floor	
Ad	Idress
New York, NY 10038	
City/Stat	e and Zip code
icolon@odysseyassoc.com	
	ed for future annual report notification)
For further information concerning this matter, please	se call:
Janet Colon at (212) 981-9580
Name of Person Area C	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. CL Nationwide	Services, Inc.		
	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	
(If name unavails	able in Florida, enter alternate corporate name	adopted for the purpose of transacting	business in Florida)
2. Nevada	3.		
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
4. 2/23/2016	5.	Perpetual	
(Date	of incorporation)	(Date of duration, if other th	an perpetual)
6,			
		in Florida, if prior to registration)	
-	(SEE SECTIONS 607.1501 & 607.1	502, F.S., to determine penalty liability)
7. 160 Broadway, 3	ord Floor NY NY 10038		
	(Princi	pal office address)	N 67:
	(Current mail	ing address, if different)	
			28 F
8. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	28 PM
Name:	Joseph Cassera		PM 12: 59 GF STATE E. FLORBA
Name.	Joseph Casselu		多
Office Address:	6600 Sunset Way, Unit 412		
	St Pete Beach	, Florida 33706-2172	
	(City)	(Zip code)	
9. Registered ago	ent'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.

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. DIRECT	ORS	
Chairman:		
Address:		
Vice Chairman	n:	
Address:		<u> </u>
Director:	Joseph Cassera	
Address:	160 Broadway, 3H FL.	
7 radi 033	New York, Ny 10038	3 66 5
Director:	James toley	<u> </u>
Address:	160 Broadway, 30FC.	28
	New York, Ny 10038	
B. OFFICE	RS	2: 59
President:	Joseph Cassera	
Address:	Joseph Cassera 140 Broadway, 3rd FC. New York, Ny. 10038	
	New York, My. 10038	
Vice President		
Address:		
Secretary:	Janues Foley	
Address:	160 Broadway, 3RDFL., Lew York, Ny.	10038
Treasurer:	James Foley	
Address:	Janes Foley 160 Broadway, 3RD Fl., New York, N.Y eccessary, you may affach an addendum to the application listing additional officers a	. 10038
NOTE: If no	ecessary, you may attach an addendum to the application listing additional officers a	.nd/or directors.
12	James Selen	40,444
	Signature of Director or Officer or director signing this document (and who is listed in number 11 above) affirms that	
	that he or she is aware that false information submitted in a document to the Departn e felony as provided for in s.817.155, F.S.	
13	Janus Foley, Director, Secy & Treasure	N
	LI IMAG OF BEINIAG BAMA AND CARACITY OF BAFRON CIOMING CHRISTON'S	

SECRETARY OF STATE





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, CL NATIONWIDE SERVICES, INC., as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since February 23, 2016, and is in good standing in this state.

OF THE STATE OF TH

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on August 17, 2016.

BARBARA K. CEGAVSKE
Secretary of State

Electronic Certificate
Certificate Number: C20160817-0195
You may verify this electronic certificate
online at http://www.nvsos.gov/

CHECK REQUEST FORM

DATE:

10/25/16

PAYABLE TO:

Florida Dept of State

MAIL TO:

Florida Dept of State, Registration Section

Div of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

COMPANY THAT EXPENSE APPLIES TO: CL NATIONWIDE SERVICES, INC.

REASON FOR CHECK REQUEST / DESCRIPTION: FL State - Foreign Business Corp Application Fee

CHECK AMOUNT: \$87.50 Nina, see attached email from Joe Cassera. Can we have the check today?

RETURN TO:

Janet Colon

APPROVED:

JCassera