

2/7/2017

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (954)208-0845

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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**FOREIGN PROFIT/NONPROFIT CORPORATION****Lugano Diamonds & Jewelry Inc.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

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Corporate Filing Menu

Help

K. SALY

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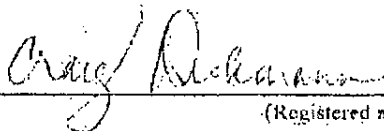
## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

*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. Lugano Diamonds & Jewelry, 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)  
California
2. (State or country under the law of which it is incorporated) 3. (FEI number, if applicable)  
02/05/2004
4. (Date of incorporation) 5. (Date of duration, if other than perpetual)
6. (Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 620 Newport Center Drive, Suite 100, Newport Beach, Ca 92660  
(Principal office address)
- (Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  
Name: Craig Dickman  
Office Address: 13860 Wellington Trace, 38 #187  
Wellington, Florida 33414  
(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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## 11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**Chairman: Mordechai PerderAddress: 620 Newport Center Drive, Suite 100Newport Beach, Ca 92660

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

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**President: Mordechai PerderAddress: 620 Newport Center Drive, Suite 100Newport Beach, Ca 92660

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Scott SussmanAddress: 620 Newport Center Drive, Suite 100, Newport Beach, Ca 92660.Treasurer: Scott SussmanAddress: 620 Newport Center Drive, Suite 100, Newport Beach, Ca 92660.**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. Mordechai Perder, President

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

**State of California**  
**Secretary of State**

**CERTIFICATE OF STATUS**

**FILED**  
**2017 FEB -7 AM 9:21**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**ENTITY NAME:**

**LUGANO DIAMONDS & JEWELRY INC.**

**FILE NUMBER:** C2605047  
**FORMATION DATE:** 02/05/2004  
**TYPE:** DOMESTIC CORPORATION  
**JURISDICTION:** CALIFORNIA  
**STATUS:** ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State of  
California.

No information is available from this office regarding the financial  
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate  
and affix the Great Seal of the State of  
California this day of February 06, 2017.

*Alex Padilla*

**ALEX PADILLA**  
Secretary of State



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 25, 2017

SCOTT SUSSMAN  
620 NEWPORT CENTER DR, STE 100  
NEWPORT BEACH, CA 92660

SUBJECT: LUGANO DIAMOND & JEWELRY INC.  
Ref. Number: W17000006903

We have received your document for LUGANO DIAMOND & JEWELRY 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):

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.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia I Simmons  
Regulatory Specialist II

Letter Number: 317A00001550.

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