F17000001852

(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:					





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2017 APR 21 AM 11: D4
SECRETARY OF STATE

K. SALY APR 25 2017

COVER LETTER

TO:	O: Registration Section Division of Corporations					
SUBJ	ECT: А <u>В</u>	LE I DRIVIN	G SCH	ool Inc		
		Name of corpor	ation - mu	st include suffix		
Dear S	ir or Madam:					
"Certif	icate of Existen	tion by Foreign Corporation ce," or "Certificate of Good gn corporation to transact b	l Standing	" and check are sub		
Please		pondence concerning this n				
	Jeffrer	1 Baird Nam				
		Nam	e of Perso	on		
A	FE T D	RIVING SCHOO	L TN	L		
		Firm	/Company	•		
21	106 Deer	Run RD FR NY 13089 City/St				
		A	Address	-		
	Latayet	R NY 13081	4			
		City/St	ate and Zi	p code		
	jbairdable	E-mail address: (to be i	o - Con	^		
	•	E-mail address: (to be u	ised for fu	ture annual report	notification)	
For fur	ther information	concerning this matter, ple	ease call:			
Tod	=	0	_		_	
Teffrey Barried at (315 Name of Person Area Code			Code	Daytime Telephone Number		
				, c.up		
	STREET/COU Registration Se Division of Co Clifton Buildin 2661 Executive Tallahassee, FI	rporations g c Center Circle		MAILING A Registration S Division of Co P.O. Box 632' Tallahassee, F	section orporations 7	
Enclos	ed is a check for	the following amount:				
™ \$70	0.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status		3.75 Filing Fee & tified 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.

1AQ	LE II DRIVING SCI	HOOL THE		
(Enter name of	f corporation; must include "INCORI" "Corp," "Inc," "Co," or "Corp.")	PORATED," "COI	MPANY," "CORPORATION,"	,
,,	(co.p.,, co, co.p.,)			
(If name unava	ailable in Florida, enter alternate corp	orate name adopte	d for the purpose of transacting	business in Florida)
2. New	York	3.	1615 37707	
(State or cour	ntry under the law of which it is incor	rporated)	(FEI number, if appl	licable)
4.	8/28/1997	5.	-	
(Da	용 2 원 / (9 9 7 ate of incorporation)		(Date of duration, if other th	nan perpetual)
6.				
	•		la, if prior to registration)	
_	•		S., to determine penalty liability	<i>(</i>)
7. 2106 R	Ster Run RO L	atayette "	14 13084 ce address)	
		(Frincipal Offic	c addiess)	
	(C	urrent mailing addr	ess, if different)	7 u.
	(0			LEG T
8. Name and str	reet address of Florida registered	agent: (P.O. Box	NOT acceptable)	AR 2
			-	0.44
Name:	JEFFRY Dan	- 4		一
Office Address:		ling BIUD	, B3	AN II: OF STATE SEE, FLORID
	Sacasata	, ,	Florida 34236	57
	Sarasota (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.

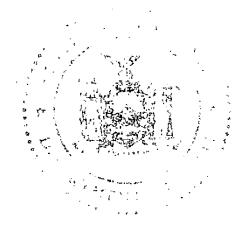
(Registered agent's signature)

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.

11. Names and business addresses of officers and/or directors:	F11 -
A. DIRECTORS	FILED
Chairman:	2017 APR 21
Address:	SECRETARY -
	SECRETARY OF STATE FALLAHASSEE, FLORIDA
Vice Chairman	
Vice Chairman:	
Address:	
Director:	
Address:	1
Director:	
Address:	
	<u> </u>
B. OFFICERS	
President: Teffrey Baird	
and hear a	
Lafayette INY 13084	
•	
21.1	
Latayette INY 13084	
Secretary:	- W
	,
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional add	
12. Signature of Director or Officer	
Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above)	
are true and that he or she is aware that false information submitted in a document a third degree felony as provided for in s.817.155, F.S.	
13. Jeffrey Baird President	
(Typed or printed name and capacity of person signing app	olication)

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of ABLE II DRIVING SCHOOL, INC. was filed on 09/16/1997, 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.



FILED MILED AND OF STATE

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 31st day of March two thousand and seventeen.

DA (

Brendan W. Fitzgerald
Executive Deputy Secretary of State