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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

MAY 12 2017

COVER LETTER

TO: Registration Section
Division of Corporations
NoHo Services, Inc.

SUBJECT: _____
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:
Jay Goldklang

NoHo Services, Inc.	Name of Person
9 Great Jones St. #4	Firm/Company
New York, NY 10012	Address
jay@nohoservices.com	City/State and Zip code
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Jay Goldklang	516	633-5296
_____	at (_____)	_____
Name of Person	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

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SECRETARY OF STATE

**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.**

NoHo Services, Inc.

1. _____
(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)
Delaware EIN 81-4904783
2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
1/5/2017
4. _____ 5. _____
(Date of incorporation) (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)
1242 SW Pine Island Rd, STE 42-257 Cape Coral, FL 33991
7. _____
(Principal office address)
- _____
(Current mailing address, if different)

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

Name: _____
17888 67th Court North

Office Address: _____
Loxahatchee 33470
_____, Florida _____
(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.



Jessica Chappell on behalf of InCorp Services, Inc.

(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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MAY 11 2017
TALLAHASSEE
SECRETARY OF
STATE

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

~~Chairman:~~ _____

~~Address:~~ _____

Director

~~Vice Chairman:~~ Jay Goldklang

Address:

9 Great Jones St. #4

New York, NY 10012

Jed Cairo

• Director:

9 Great Jones St. #4

Address:

New York, NY 10012

Patrick Chun

• Director:

9 Great Jones St. #4

Address:

New York, NY 10012

B. OFFICERS

Jay Goldklang (Chief Executive Officer, President, Treasurer, and Secretary)

• ~~President:~~

9 Great Jones St. #4

Address:

New York, NY 10012

Head of Operations

• ~~Vice President:~~ David Diaz

Address:

2545 Sawgrass Lake Ct.

Cape Coral, FL 33909

~~Secretary:~~

~~Address:~~

~~Treasurer:~~

~~Address:~~

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SECRETARY OF STATE

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. _____

Jay Goldklang

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.

Jay Goldklang, Chief Executive Officer

13. _____

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

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NOHO SERVICES, 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 FOURTH DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NOHO SERVICES, INC." WAS INCORPORATED ON THE FIFTH DAY OF JANUARY, A.D. 2017.

FILED
MAY 11 PM 4:05
SECRETARY OF STATE
HALLMARKS, LONDON




Jeffrey W. Bullock, Secretary of State

6272619 8300

SR# 20173095762

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202487754

Date: 05-04-17