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(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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05/23/17--01011--019 **70.00



MAY 2 3 2017 J SHIVERS

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: New tech Installation usa. Ivc.
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:
JORGE Prol
Name of Person
Newled Installation uses tire.
Firm/Company
444 Smith Street
Address
Middletaun, CT. OLAST City/State and Zip code
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Josephan at (860) 344-1261
Name of Person / Area Code Daytime Telephone Number
STREET/COURIER ADDRESS: MAILING ADDRESS:
Registration Section Registration Section
Division of Corporations Clifton Building Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassec, FL 32314
Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$78.75 Filing Fee & \$78.75 Filing Fee & \$570.00 Filing Fee.
Certificate of Status Certified Copy 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. Nousk	ch Installation	USE INC.	
	orporation; must include "INCORPORATED," 'orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
ис., со., с	orp, inc, Co, or Corp.)		
/IC name unamedia	able in Elecident of the classical and a second	A and Cooks are a Cooks to the	
(11 name unavam	ane in riorioa, enter atternate corporate name	adopted for the purpose of transacting business in Florid	3)
2. Conn		06-1548696	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)	
4. 05/3	1/99 5.	Perpetual	
(Date	of incorporation)	(Dale of duration, if other than perpetual)	
alut o	1 3 - 2017		
		Florida, if prior to registration)	
	(SEE SECTIONS 607.1501 & 607.15	502, F.S., to determine penalty liability)	
7. <u>444</u>	Smile Street 1	Meddletown Ct. 0649	72
	(Princip	al office address)	
	(Current maili	ng address, if different)	,
			7
8. Name and street	et address of Florida registered agent: (P.C	D. Box NOT acceptable)	
Name:	COGENCY GLOBAL INC.	Grand Control of Contr	N W
ranic.	445 North Calbaum Stroot	Suite 4	- }
Office Address:	115 North Calhoun Street,	Suite 4	
	Tallahassee	Florida 32301	7 3
	(City)	(Zip code)	<u>G1</u>
	•	25 A	
Registered age	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.

(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. DIREC	
Chairman:	Mechal Pexcy
Address: _	Mechel Percy Abo Marrier, Actor Vide, combec, CA. JOH- 1 AC
Vice Chairr	nan:
Address: _	
Director: _	
Address: _	
B. OFFIC	CERS
President:	Michel Paray
	460 Morrier Actor White, Queber, CA. SOH-170
Vice Presid	lent:
Secretary:	NIATHALIE BESSEHE
	460 Marrier, Actor Wate, Quebec, CA. JOH-1AO
Treasurer:	
Address: _	
NOTE: I	f necessary, you may attach an addendum to the application listing additional officers and/or directors.
12	
are true an	Signature of Director or Officer or or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes gree felony as provided for in s.817.155, F.S.
13. <u>N</u>	Athalie Brosche Johaly Bolls
	(Typed or printed name and capacity of person signing application)

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that the certificate of incorporation of

NEWTECH INSTALLATION USA INC.

a domestic STOCK corporation, was filed in this office on June 03, 1999, a certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of this office such corporation is in existence.

Secretary of the State

Menk

Date Issued: May 16, 2017

Business ID: 0622516 Express Certificate Number: 2017159528001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov