

F17000002837

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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(Business Entity Name)

(Document Number)

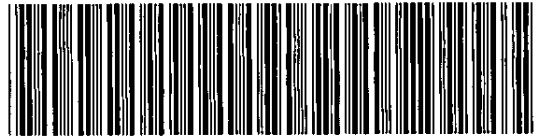
Certified Copies _____

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W17-48287 CWO + RA Sign

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2017 JUN 19 PM 1:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY

JUN 22 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Miami Rugby Pro, Inc.

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:

Severine Gianese-Pittman, Esq.

Name of Person

Gianese-Pittman, P.A.

Firm/Company

100 N. Biscayne Blvd., Suite 3070

Address

Miami, FL 33132

City/State and Zip code

sgianese@sgpittman.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Severine Gianese-Pittman, Esq.

305 722-5986
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

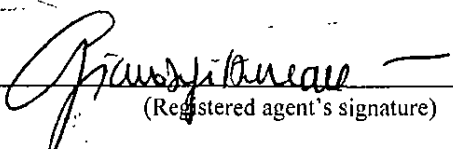
**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*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. Miami Rugby Pro, 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)
Delaware
2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 09/01/2016 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)
7. 100 N. Biscayne Blvd., Suite 3070, Miami, FL 33132
(Principal office address)
- 100 N. Biscayne Blvd., Suite 3070, Miami, FL 33132
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Gianese-Pittman, P.A.
- Office Address: 100 N. Biscayne Blvd., Suite 3070
- Miami, FL , Florida 33132
(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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2017 JUN 19 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Christophe Kwiecinski

Address: 2500 NW 74 Avenue

Miami, FL 33122

Director: _____

Address: _____

B. OFFICERS

President: Christophe Kwiecinski

Address: 2500 NW 74 Avenue

Miami, FL 33122

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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. Christophe Kwiecinski

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

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2017 JUN 19 PM 1:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MIAMI RUGBY PRO 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 TWENTY-FIRST DAY OF JUNE, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MIAMI RUGBY PRO INC." WAS INCORPORATED ON THE FIRST DAY OF SEPTEMBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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2017 JUN 19 PM 1:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



6139148 8300

SR# 20174864576

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


Jeffrey W. Bullock, Secretary of State

Authentication: 202748265

Date: 06-21-17



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 7, 2017

SEVERINE GIANESE-PITTMAN, ESQ.
GIANESE-PITTMAN P.A.
100 N BISCAYNE BLVD, STE. 3070
MIAMI, FL 33132

SUBJECT: MIAMI RUGBY PRO, INC.
Ref. Number: W17000048287

RECEIVED
2017 JUN 19 PM 5:51
STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FLORIDA

We have received your document for MIAMI RUGBY PRO, 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):

The registered agent must sign accepting the designation.

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Karen A Saly
Regulatory Specialist II

Letter Number: 817A00011543