# F17000003855

(Requestor's Name)	900302553109		
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)	08/16/1701022005 **87.50		
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:  CET  WIT-U1883			
Filedinerrar, see corrected record N19000002369 filed Damesti 2/25/19			
	11 11 ED 143		
Office Use Only	₩ 9: <b>43</b>		

S. WARREN AUG 2 8 2017



August 17, 2017

JOE PELLEGRINO 1784 BERKSHIRE CIRCLE SW VERO BEACH, FL 32968

SUBJECT: LEGACY MINDED MEN, INC

Ref. Number: W17000067883

We have received your document for LEGACY MINDED MEN, INC and your check(s) totaling \$87.50. 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.

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.

Letter Number: 117A00016921

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

то:	Registration Se Division of Co				
SUBJI	ECT:	LEGACY M Name of corpora	insed	men 1	Vΰ
		Name of corpora	tion - must	include suffix	
Dear S	ir or Mađam:				,
"Certif	icate of Existen	tion by Foreign Corporation ce," or "Certificate of Good : gn corporation to transact bu	Standing" a	nd check are sul	
Please	return all corres	pondence concerning this ma	atter to the i	following:	
		Joe Pellea	(102		
		Joe Pelleg	of Person	7-7-8-	<del> </del>
		186000 mino	led	e ,	
	<del></del>	Firm/C	Company	· //	
			, .		
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		,			
		City/Sta	te and Zip c	ode	
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	•	E-mail address: (to be us	<del>∤∽ /</del> ed for futur	e annual report	AACYMIN ded new org
For fur	ther information	concerning this matter, plea		·	,
	TOE Pell	262102 W. 97	2 ; }	74 (- XU2)	
	Name of Perso	97102 at ( <u>92</u>		Daytime Telep	hone Number
	STREET/COU Registration Se Division of Cor Clifton Buildin 2661 Executive Tallahassee, FI	rporations g : Center Circle		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7
Enclose	ed is a check for	the following amount:			
<b>□ \$</b> 70.	.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status		5 Filing Fee & sed 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 BUNINESS IN THE STATE OF FLORIDA. 日本で名で「NAVOO MEM LIVE (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) 2. Note Terror (State or country under the law of which it is incorporated) 3. 27-3973816 (FEI number, if applicable) (Date of incorporation) 5. (Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) Beakshine Circle St. Vero Binch FL (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box, NOT acceptable) Name 1784 BERASHING CICELE Sh.
WIRE BOACH Florida 32968
(City) (Zip code) Office Address: 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.

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.

(Registered agent's signature)

-

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

A. DIRECTORS	
Chairman: Too Colony to	
Address: 1714 Beath hoe Chele Su	
10:3 pinh FL 32760	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
	<b></b>
B. OFFICERS	A
President: Dec Pelle Gran	
Address: 1704 Beilisher Crite Sty	
Vero Beach FL 32968	<b>9</b>
Vice President:	중을 <b>5</b>
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary you may attach an addendum to the application listing additional office	eers and/or directors.
Signature of Director or Officer	
Signature of Director of Officer  The officer of director signing this document (and who is listed in number 11 above) affirms  are true and that he or she is aware that false information submitted in a document to the De  a third degree felony as provided for in s.817.155, F.S.	s that the facts stated herein partment of State constitutes
3. <u> </u>	
(Typed or printed name and capacity of person signing application)	

## STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

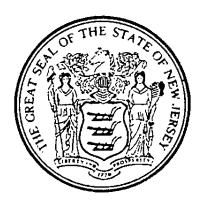
### LEGACY MINDED MEN, INC. 0101010036

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Non-Profit Corporation was registered by this office on July 13, 2010.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

JOSEPH J. PELLIGRINO 620 ROUTE 23 NORTH 2ND FLR. POMPTON PLAINS, NJ 07444



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 28th day of August, 2017

Ford M. Scudder Acting State Treasurer

Certificate Number: 6082141841

Verify this certificate online at

https://www1.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp