F17000003922

(Re	questor's Name)	 -
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	-
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Office Use Only



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August 7, 2017

MICHAEL D PATIERNO 218 E BEARSS AVE STE 332 TAMPA, FL 33613 US

SUBJECT: BEVERAGE BLOCKS INCORPORATED

Ref. Number: W17000064516

We have received your document for BEVERAGE BLOCKS INCORPORATED and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return 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: 917A00016018

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Section

Division of Corporations
SUBJECT: BEVERAGE BLOCKS, FIX.
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:
Michael D. Patierro Name of Person
Name of Person
BEVERAGE BLOCKS INC
Éirm/Company
218 E BEARSS AVE, SUITE#332
Address
218 E BEARSS AVE, SUITE#332 Address TAMPA, FL 336/3 City/State and Zip code M patier no E-mail address: (to be used for future annual report notification)
City/State and Zip code
mpetierno
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Michael Patierro at (813) 308-8711 Name of Person Area Code Daytime Telephone Number
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 Tallahassee, FL 32314
Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\Bar{\text{Certificate of Status}}\$\$ \$78.75 Filing Fee \$\text{Certified Copy}\$\$ \$87.50 Filing Fee, Certificate of Status \$\text{Certified Copy}\$\$ \$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.

	•	ted for the purpose of transacting business in Florida) P/- 73487/
(State or country under the law of which it	is incorporated)	9/- 3368356 (FEI number, if applicable)
		(Date of duration, if other than perpetual)
(Date of incorporation)		(Date of duration, if other than perpetual)
		F.S., to determine penalty liability)
	3 607.1501 & 607.1502, i	F.S., to determine penalty liability) 78 332 TAMPA, PL 336 ffice address)
	3 607.1501 & 607.1502, i	TE 332 TAMPA, FL 336 ffice address) ii dress, if different)
218 E. BEARSS	(Current mailing ad	TE 332 TAMPA, PL 336 ffice address) dress, if different) TO SERVE NOT acceptable)
Name: Mchael Pa	(Current mailing ad istered agent: (P.O. Bo	TE 332 TAMPA, PL 336 ffice address) dress, if different) ox NOT acceptable) SS Co
. 218 E. BEARSS Name and street address of Florida reg	(Current mailing ad istered agent: (P.O. Bo	TE 332 TAMPA, PL 336 ffice address) dress, if different) ox NOT acceptable) SSE SE

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: A. DIRECTORS Chairman: Mechael D. Patierno Address: 17121 Olangewood Dr. Vice Chairman: __ Address: Director: Address: **B. OFFICERS** Address: _ ___ ___ Vice President: Address: Secretary: _ Address: Treasurer: __ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. Michael K

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

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BEVERAGE BLOCKS, 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 AUGUST, A.D.

2017.



Authentication: 203093959

Date: 08-21-17