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(Requestor's Name)						
(Address)						
(Address)						
(Ci	ty/State/Zip/Phon	e #)				
PICK-UP	MAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	Certificate	s of Status				
Special Instructions to Filing Officer:						





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COVER LETTER

то:	ΓO: Registration Section Division of Corporations							
SUBJ	ECT:	Wast	Street	- Inte	eniors. I	nc.		
2020					include suffix			
Dear S	ir or Madam:							
"Certif	icate of Existen		ite of Good S	Standing'' a	nd check are sub	ct Business in Florida," omitted to register the		
Please	return all corres	spondence concer	ning this ma	tter to the f	ollowing:			
Christina Russo								
Christine Russo Name of Person								
West Street Interiors Firm/Company								
Firm/Company								
308 E. 79th Street #2E								
	N	lew Yar	K, N	14_	10075			
	russoc	<u>hristi ne</u> E-mail addre	@ ma	c c	om_			
		E-mail addre	ss: (to be use	ed for futur	e annual report i	iolification)		
For fur	ther information	concerning this	matter, pleas	se call:				
7h.	ristine Ru	nc) SSO	at (64 6	6 6	294-1	802		
	Name of Perso	n	Area C	ode	Daytime Telepi	hone 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						ection orporations		
Enclose	ed is a check for	the following an	nount:					
□ \$70.	.00 Filing Fee	\$78.75 Fili Certificate	ng Fee & of Status		Filing Fee & ed Copy	S87.50 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. West Street Interiors, 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) 2. New York

(State or country under the law of which it is incorporated)

(FEI number, if applicable) 4. 9/28/06 5. (Date of incorporation) (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)

7. 308 E. 79th Street #2# NewYak NY 10075
(Principal office address)

310 Greenmich Street #22L NewYak NY 1001
(Current mailing address, if different)

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

NORTHWEST REGISTERED AGENT LLC Name:

3030 N. Rocky Point Drive, STE 150A Office Address:

TAMPA

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.

Tom Glover/Manager/Northwest Registered Agent LLC

(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: Vice Chairman: ______ Address: _____ Director: _ Address: ___ Address: B. OFFICERS President: Christine Russo Address: 310 Greenmich Street #222 Vice President: ___ Address: _____ Secretary: Address: ___ Treasurer: Address: _______ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Mue RUS80. 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. Christine Rusco, Owner+

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

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of WEST STREET INTERIORS, INC. was filed on 09/28/2006, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation. I further

A Biennial Statement was filed 09/10/2008.

A Biennial Statement was filed 10/18/2010.

A Biennial Statement was filed 07/11/2017.

I further certify that no other documents have been filed by such

corporation.

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 18th day of August two thousand and seventeen.

Brendan W. Fitzgerald Executive Deputy Secretary of State