F170000053a7

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Duning of Turkha Marra)
(Business Entity Name)
(Document Number)
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IN 29 2017 ARRIS

COVER LETTER

TO:	Registration Section Division of Corporations					
SHDI	Fairco, Inc.					
2010		of corporation	ı - must	include suffix		
Dear S	Sir or Madam:					
"Certi	nclosed "Application by Foreign C ficate of Existence," or "Certificat referenced foreign corporation to	e of Good Star	nding" a	nd check are su	act Bi binitt	usiness in Florida." ed to register the
Please Sal Co	return all correspondence concerr hen	ning this matte	r to the f	ollowing:		
	· · · · · · · · · · · · · · · · · · ·	Name of	Person			
Fairco.	Inc.					
PO Bo	x 2533	Firm/Con	прапу			-
Chapel	Hill, NC 27515	Addre	ess			
fairco@	gmsn.com	City/State a	nd Zip c	ode		
	E-mail addres	s: (to be used t	for futur	e annual report	notifi	cation)
For fur	ther information concerning this r	natter, please o	call:			
Jessie I	Blalock	919 571-7055 at ()				
	Name of Person			Daytime Telep	ohone	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		
Enclos	ed is a check for the following am	ount:				
■ \$70 [[246	0.00 Filing Fee S78.75 Filing Certificate of Cashed			Filing Fee & ed Copy	٥	\$87.50 Filing Fee. Certificate of Status & Certified Copy

COVER LETTER

Dear Ms. Harris,

I was advised by MICHELLE to mail this into you with the rejection reference so this can be Finalized.

W-17000091274

I have signed item 12 and added address to B. officer as well.

legards, Sal cohen. 9192193636

2017 HOW 2.7 FM 3:31-



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 15, 2017

SAL COHEN PO BOX 2533 CHAPEL HILL, NC 27515

SUBJECT: FAIRCO, INC. Ref. Number: W17000091274



We have received your document for FAIRCO, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being seturned for the following account of the followin returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 217A00023190

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

"Inc.," "Co.," "C	corporation; must include "INCORPORATED," * Corp." "Inc." "Co." or "Corp.")	COSITANT, CORPORATION,			
(If name unavail North Carolina	able in Florida, enter alternate corporate name ad			lorida)	-
	y under the law of which it is incorporated) 5.	(FEI number, if applicable)			
(Date	(Date of duration, if other th	an perpetual)		_	
	(Current mailing a address of Florida registered agent: (P.O. 1	address, if different) Box NOT acceptable)		2817 8%	- ";
Name:	Salomon Cohen	<u></u>		SV 27	;;
fice Address:	4583 Willow Run Way		***		
	Lake Worth, FL (City)	33467 , Florida (Zip code)	7.1	6: 3 <u>1</u>	
	ent's acceptance: ed as registered agent and to accept service	of process for the above stated of it as registered agent and agree	corporation	at the	e plac acity ny

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: Director: B. OFFICERS Salomon Cohen President: __ CHAPEL HILL NC 27515 Vice President: Address: Secretary: Address: ___ Treasurer: Address: ____ 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

13. _ SALOMON COHEN Hesident

a third degree felony as provided for in s.817.155. F.S.

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



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

FAIRCO, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 29th day of April, 1996, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.





Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 23rd day of October, 2017.

Elaine I. Marshall

Secretary of State