

# F18000000087

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(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

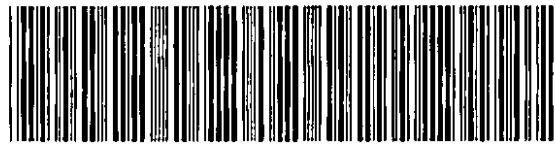
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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JAN 09 2016

Y SULKER

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 995716 7895496

AUTHORIZATION

COST LIMIT : \$70.00

ORDER DATE : January 4, 2018

ORDER TIME : 9:39 AM

ORDER NO. : 995716-005

CUSTOMER NO: 7895496

FOREIGN FILINGS

NAME: BUSS CONSULTING INCORPORATED

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT#

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Buss Consulting Incorporated

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:

David Buss

Name of Person

Buss Consulting Incorporated

Firm/Company

2101 NW 2nd Avenue Suite 5

Address

Boca Raton Fla 33431

City/State and Zip code

David.buss@busstaxlaw.com

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

For further information concerning this matter, please call:

David Buss

at ( 516 ) 857-6626

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. Buss Consulting Incorporated  
(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 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. \_\_\_\_\_ 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. 2101 NW 2nd Avenue, Suite 5, Boca Raton, Fla 33431  
(Principal office address)

(Current mailing address, if different)

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

Name: David Buss

Office Address: 4301 N. Ocean Blvd, Apt 905A

Boca Raton, Florida 33431  
(City) (Zip code)

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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.*

By: David Buss  
(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: David Buss

Address: 4301 N. Ocean Blvd, Apt 905A, Boca Raton, Fla. 33431

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Janine Buss

Address: 4301 N. Ocean Blvd, Apt 905A, Boca Raton, Fla 33431

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS

President: David Buss

Address: 4301 N. Ocean Blvd, Apt 905A, Boca Raton Fla 33431

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Janine Buss

Address: 4301 N. Ocean Blvd, Apt 905A, Boca Raton, Fla 33431

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. David Buss

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. David Buss

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

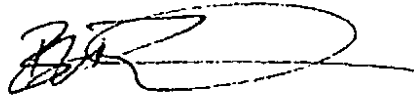
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TALLAHASSEE, FLORIDA

**State of New York**  
**Department of State** } **ss:**

I hereby certify, that the Certificate of Incorporation of BUSS CONSULTING INCORPORATED was filed on 12/31/2010, 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.

\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 05th day of January  
two thousand and eighteen.*



Brendan W. Fitzgerald  
Executive Deputy Secretary of State



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ALBANY, FLORIDA

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