

F18000001197

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

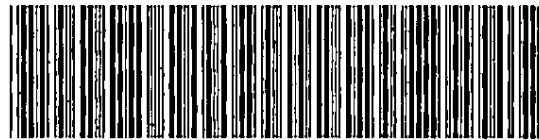
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

1818-17377

Office Use Only



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2018 MAR -6 AM 8:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. MILLIGAN

MAR 13 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 21, 2018

DONNA M. FLAMMANG, ESQ.
27200 RIVERVIEW CENTER BLVD., STE 310
BONITA SPRINGS, FL 34134

SUBJECT: WEB FORZA, INC.
Ref. Number: W18000017377

We have received your document for WEB FORZA, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being 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.

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.

Michelle Milligan
Senior Section Administrator

Letter Number: 618A00003583



LISTEN. SOLVE. EMPOWER.

P: 239.992.6578 F: 239.992.9328 W: bmdpl.com
2100 Riverside Center Boulevard, Suite 510
Boca Raton, FL 33434

Donna M. Flammang
Partner
M: 239.992.6578
D: 239.405.8672
F: 239.992.9328
E: dmflammang@bmdpl.com

February 27, 2018

Florida Department of State
Division of Corporations
Attn: Michelle Milligan
P. O. Box 6237
Tallahassee, FL 32314

Re: Web Forza, Inc. / W18000017377

Dear Ms. Milligan:

In reference to the above referenced entity and your Letter Number 618A00003583, enclosed please find the Application by Foreign Corporation for Authorization to Transact Business in Florida with the application with the signature of one of the directors of the corporation, which I inadvertently forgot to send to you in my original submittal.

Thank you for your assistance and attention to this matter.

Very truly yours,

A handwritten signature in black ink that reads "Ann C. Roczek". The signature is written in a cursive style with a large, looped "O" at the end.

Ann C. Roczek
Paralegal

/acr
Enclosure

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Web Forza

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:

Donna M. Flammang, Esquire

Name of Person

Brennan, Manna & Diamond, P.L.

Firm/Company

27200 Riverview Center Blvd., Suite 310

Address

Bonita Springs, FL 34134

City/State and Zip code

dmflammang@bmdpl.com

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

For further information concerning this matter, please call:

Donna M. Flammang

239

992-6578

at (_____) _____

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.*

Web Forza, Inc.

1. _____
(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. Delaware 3. 26-456411
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. February 17, 2009 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. 8540 Dayton Avenue, Fort Myers, FL 33907
(Principal office address)

(Current mailing address, if different)

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

Name: Donna M. Flammang

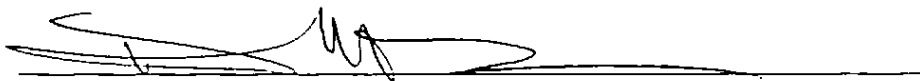
Office Address: 27200 Riverview Center Blvd., Suite 310

Bonita Springs, Florida 34134
(City) (Zip code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Pierre Narath

Address: 8540 Dayton Avenue

Fort Myers, FL 33907

Vice Chairman: _____

Address: _____

Director: Jason Raza

Address: 8540 Dayton Avenue

Fort Myers, FL 33907

Director: _____

Address: _____

B. OFFICERS

President: Jason Raza

Address: 8540 Dayton Avenue

Fort Myers, FL 33907

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

12. _____

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. Pierre Narath, Chairman

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

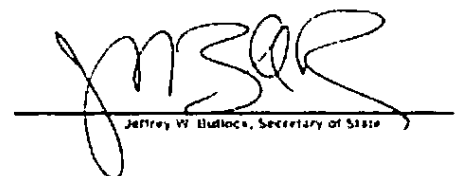
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "WEB FORZA, 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 SEVENTH DAY OF FEBRUARY, A.D. 2018.



Jeffrey W. Bullock, Secretary of State

4656557 8300

SR# 20180776567

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202107390

Date: 02-07-18