

F1800000 1890

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

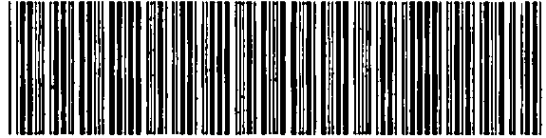
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/05/18--01011--004 **70.00

FILED
2018 APR 23 AM 9:46
FBI - NEW YORK
MAIL ROOM

APR 24 2018
J. HARRIS

SC038 8111

COVER LETTER

TO: Registration Section
Division of Corporations

SERVICES TIME INC.

SUBJECT: _____
Name of corporation - must include suffix

RECEIVED
2018 APR 23 PM 2:23
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

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:

MELISSA BLANCHARD

Name of Person

Firm/Company
17635 NW 27TH AVE

Address
MIAMI GARDENS, FL 33056

City/State and Zip code
servicetimeinc@gmail.com

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

For further information concerning this matter, please call:

MELISSA BLANCHARD 305 785-6406

Name of Person at () 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

7/14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 6, 2018

MELISSA BLANCHARD
17635 NW 27TH AVE
MIAMI GARDENS, FL 33056

SUBJECT: SERVICES TIME INC.
Ref. Number: W18000033035

FILED
2018 APR 23 AM 9:44
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS

We have received your document for SERVICES TIME 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 name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document number of the name conflict is L17000197567.

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: 218A00007026

**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.*

SERVICES TIME INC.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co." or "Corp.")

FL SERVICES TIME INC.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. HAWAII 3. 82-4862773
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 04/06/2015 5. PERPETUAL
(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. 17635 NW 27TH AVE MIAMI GARDENS, FL 33056
(Principal office address)

(Current mailing address, if different)

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

Name: MELISSA BLANCHARD

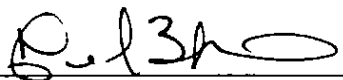
Office Address: 17635 NW 27TH AVE

MIAMI GARDENS, Florida 33056
(City) (Zip code)

FILED
2018 APR 23 AM 9:44
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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: MELISSA BLANCHARD

Address: 17635 NW 27TH AVE MIAMI GARDENS, FL 33056

Director: _____

Address: _____

B. OFFICERS

President: MELISSA BLANCHARD

Address: 17635 NW 27TH AVE MIAMI GARDENS, FL 33056

Vice President: _____

Address: _____

Secretary: MELISSA BLANCHARD

Address: 17635 NW 27TH AVE MIAMI GARDENS, FL 33056

Treasurer: MELISSA BLANCHARD

Address: 17635 NW 27TH AVE MIAMI GARDENS, FL 33056

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

12. _____

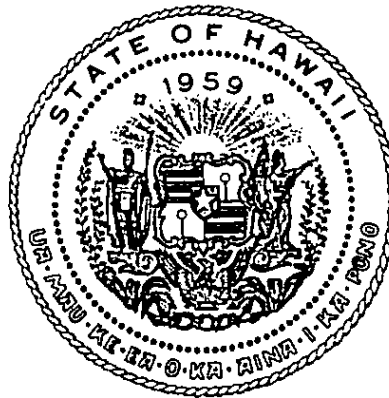
Signature of Director or Officer

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. MELISSA BLANCHARD PRESIDENT

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

FILED
2018 APR 23 AM 9:46
CLERK OF THE COURT
TALLAHASSEE, FLORIDA



Department of Commerce and Consumer Affairs

CERTIFICATE OF GOOD STANDING

I, the undersigned Director of Commerce and Consumer Affairs of the State of Hawaii, do hereby certify that according to the records of this Department,

SERVICES TIME INC.

was incorporated under the laws of Hawaii on 04/06/2015 ; and that it is an existing corporation in good standing, and is duly authorized to transact business.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Department of Commerce and Consumer Affairs, at Honolulu, Hawaii.

Dated: March 21, 2018

Director of Commerce and Consumer Affairs