

FB000002769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

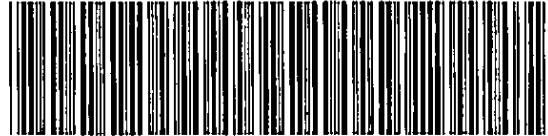
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/04/18--01027--003 **70.00

FILED

2018 JUN -4 A 11:44

U.S. DISTRICT COURT

6/13/18DS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PB Franchise, Inc.

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:

Serena J. Kallas

Name of Person

Kallas Legal, APC/ PB Franchise, Inc.

Firm/Company

770 L Street, Suite 950

Address

Sacramento, CA 95814

City/State and Zip code

SJKallas@kallaslegal.com

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

For further information concerning this matter, please call:

Serena J. Kallas

Name of Person

at (916) 633-0677

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 8, 2018

SERENA J KALLAS
770 L ST SUITE 950
SACRAMENTO, CA 95814

SUBJECT: PB FRANCHISE, INC.
Ref. Number: W18000042679

We have received your document for PB FRANCHISE, 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.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 918A00009461

FILED

RECEIVED
2018 JUN -4 AM 10:51
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314

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Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$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. PB Franchise, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

PB Franchise FL, Inc.

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

2. California 3. 82-2365041
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 6, 2017 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. 81 Curtner Ave, Suite 30, San Jose, CA 95125
(Principal office address)

(Current mailing address, if different)

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

Name: Registered Agents Inc.

Office Address: 3030 N. Rocky Point Dr. STE 150A

Tampa, Florida 33607
(City) (Zip code)

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 Agents Inc.
Bill Havre

(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.

FILED
2019 JUN 11 AM 11:14
TAMPA

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

✓ Chairman: CHARLIE LE

Address: 81 Curtner Ave, Suite 30, San Jose, CA 95125

✓ Vice Chairman: NICK NGUYEN

Address: 81 Curtner Ave, Suite 30, San Jose, CA 95125

✓ Director: CHARLIE LE

Address: 81 Curtner Ave, Suite 30, San Jose, CA 95125

Director: CHARLIE LE

Address: 81 Curtner Ave, Suite 30, San Jose, CA 95125

B. OFFICERS

✓ President: CHARLIE LE

Address: 81 Curtner Ave, Suite 30, San Jose, CA 95125

✓ Vice President: NICK NGUYEN

Address: 81 Curtner Ave, Suite 30, San Jose, CA 95125

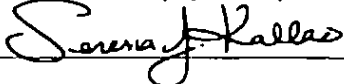
Secretary: CHARLIE LE

Address: 81 Curtner Ave, Suite 30, San Jose, CA 95125

Treasurer: NICK NGUYEN

Address: 81 Curtner Ave, Suite 30, San Jose, CA 95125

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. Serena J. Kallas, Attorney

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

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

PB FRANCHISE, INC.

FILE NUMBER: C4033738
FORMATION DATE: 06/06/2017
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of April 12, 2018.

ALEX PADILLA
Secretary of State