

(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:			
W18-6425			

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SECNETARY OF STATE

D BRUCE AUG 02 2018



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 25, 2018

ROBERT SILVER 5644 E. THOMAS ROAD PHOENIX, AZ 85018

SUBJECT: SILVERW, INC. Ref. Number: W18000067825

We have received your document for SILVERW, 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 alternate name selected for your corporation is not available in Florida. Please select a new alternate name that contains "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." You may make the corrections to the alternate 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 or your filing will be considered abandoned.

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

Deborah Bruce Corporate Records Supervisor 2010 AUG - 2 PM 2: 42 Secretary of State

Letter Number: 418A0001531இ

www.sunbiz.org

COVER LETTER

	stration Section sion of Corporations							
SUBJECT:	Silverware, Inc.							
,,ODJ1,C1.		me of corporation	on - musi	include suffix				-
Dear Sir or N	dadam:							
"Certificate o	I "Application by Foreig of Existence." or "Certif need foreign corporation	icate of Good Sta	anding"	and check are sub				
Please return	all correspondence con-	cerning this matt	er to the	following:				
Robert Silver								
·-		Name o	f Person					_
Silverware, In	oc .							
		Firm/Co	mpany					
5644 E. Thom	nas Road					Z	29	
		Add	lress			C.2.	A	•
Phoenix, Ariz	ona 85018					HAS	<u>ු</u> ව	-
		City/State	and Zip	code		338	1,0	ſ
bob@silverw.						- 	R	_ ř
	E-mail add	dress: (to be used	l for futu	ire annual report i	notification)	8	2:42	, .
For further in	nformation concerning th	ris matter, please	call:			>"	†	
Bob Silver		480	423	423-8324				
Nam	ne of Person	at (Area Co) ode	Daytime Telep	hone Numbe			
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 Fi	_	Filing Fee & ate of Status		75 Filing Fee & fied Copy		Filing Teate of Teater of	Statu	s &

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.

Silverware, Inc.	A DAMAGA A A PERIOD N	ZYALADA ANA WASAN ANA ANA ANA ANA ANA ANA ANA ANA ANA	
	orporation; must include "INCORPORATED," orp." "Inc." "Co." or "Corp.") SILVERU. Co	"CORPORATION. "CORPORATION. "CORPORATION.	a standard
Silver ware lineon	porated		
(If name unavail)	ible in Florida, enter alternate corporate name a	dopted for the purpose of transacting	business in Florida)
Illinois	3.	36-3678994	
(State or countr	y under the law of which it is incorporated)	(FEI number, it app	licable)
12/06/1989	5.	Annual	
	of incorporation)	(Date of duration, if other th	nan perpetual)
06/25/2018			
	(Date first transacted business in		
	(SEE SECTIONS 607.1501 & 607.15	02, F.S., to determine penalty liability	()
5644 E. Thomas I	Road, Phoenix, AZ 85018		
	(Princip	al office address)	2018 SEI TALLI
		12.32.32	
	(Current mailin	g address, if different)	AHAMA
		N NOT	SSE A
Name and stree	et address of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	
Name:	Mitzi Ridley		SH SH
ffice Address:	6720 S. Florida Ave, #2307		2. 1. 2. 1. 2. 1
THEC Address.	Lakeland	33813	-
	(Civ.)	Florida	
	(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 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.

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

	Sara Silver			
	5644 E. Thomas Road			
ridu(cas.	Phoenix, Arizona 85018			
Vice Cha	irman:			
Address:				
Director	Robert Silver			
	5644 E. Thomas Road			
, , , , , , , , , , , , , , , , , , , ,	Phoenix, Arizona 85018			
Director:				
Address:				
B. OFF	ICERS			
President	Sara Silver			
	5644 E. Thomas Road		~~~	
	Phoenix, Arizona 85018	SEC.	818 A	<u>- 17</u>
Vice Pres	sident:	— <u> </u>	AUG -	MARKET -
Address:		SEE F	PH	
		LORIO	- <i>i</i> 'n-	State of the state
Secretary		<u> </u>	7	
Address:				
Treasure				
Address:	5644 E. Thomas Road, Phoenix, AZ 85018			
NOTE:	If necessary, you may attach an addendum to the application listing additional officers a	nd/or direc	ctors.	
are true a third d	Signature of Director or Officer cer or director signing this document (and who is listed in number 11 above) affirms that and that he or she is aware that false information submitted in a document to the Department egree felony as provided for in s.817.155. F.S. bert Silver, Treasurer	the facts s nent of Sta	tated h	ierein aitutes

File Number

5575-855-7



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

SILVERWARE, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON DECEMBER 06, 1989, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 2018

day of

JULY

A.D.

Authentication #: 1819002294 venfiable until 07/09/2019 Authenticate at http://www.cyberdriveillinois.com

SECRETARY OF STATE