

F18 00000 4056

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

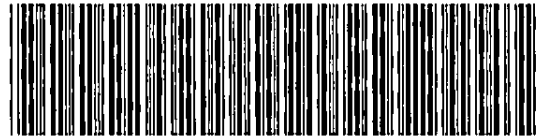
(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 AUG 31 PM 2:15

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EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 23, 2018

STEVEN KAREL
201 EAST 87TH STREET, STE 24 R
NEW YORK, NY 10128

SUBJECT: STONECUTTER EVENT PROMOTIONS, INC.
Ref. Number: W18000063967

We have received your document for STONECUTTER EVENT PROMOTIONS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Tammi Cline
Regulatory Specialist III

Letter Number: 418A00017500

2018 AUG 31 PM 2:15



FLORIDA DEPARTMENT OF STATE
Division of Corporations

To
Jesse Boffa, SR
908-432-3103

July 12, 2018

STEVEN KAREL
201 EAST 87TH ST
STE 24R
NEW YORK, NY 10128

SUBJECT: STONECUTTER EVENT PROMOTIONS, INC.
Ref. Number: W18000063967

We have received your document for STONECUTTER EVENT PROMOTIONS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return the corrected original and one copy of 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.

Brittany M Figueroa
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 518A00014408

2
ENCLOSURE

NEED

2018 JUL 31 PM 2:15

2018 JUL 21 AM 11:23

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Stonecutter Event Promotions, 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:

Steven Karel

Name of Person

Stonecutter Event Promotions, Inc.

Firm/Company

201 East 87th St. Suite 24R

Address

New York, NY 10128

City/State and Zip code

stevekarel@stonecuttermedia.com

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

For further information concerning this matter, please call:

Steven Karel

212

2895033

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.

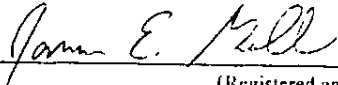
1. Stonecutter Event Promotions, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
New York 13-3746364
2. (State or country under the law of which it is incorporated) 3. (FEI number, if applicable)
12/21/1993
4. (Date of incorporation) 5. (Date of duration, if other than perpetual)
New Filing
6. (Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
201 East 87th St. Suite 24R, New York, NY 10128
7. (Principal office address)
(Current mailing address, if different)

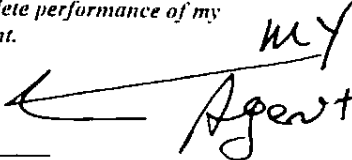
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: ^{N/A} James Gell / 24 Group Inc.
Office Address: 15031 SW 49th Court
Miramar, Florida 33027
(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)


Agent

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: N/A

Address:

Vice Chairman: N/A

Address:

Director: N/A

Address:

Director: N/A

Address:

B. OFFICERS

President: Steven Karel

Address: 201 East 87th St. Suite 24R

New York, NY 10128

Vice President: N/A

Address:

Secretary: N/A

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 § 847.155, F.S.

13. Steven Karel, President

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

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

I hereby certify, that the Certificate of Incorporation of STONECUTTER EVENT PROMOTIONS, INC. was filed on 12/21/1993, 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.

The Biennial Statement is past due.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 08th day of August
two thousand and eighteen.*

A handwritten signature in black ink, appearing to read "B. Fitzgerald", written over a horizontal line.

Brendan W. Fitzgerald
Executive Deputy Secretary of State