

# F18000004122

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2018 AUG 27 AM 11:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N CULLIGAN

SEP 7 2018

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Nutri Center, 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:

Dayra Salazar

Name of Person

1 Tax Pro, Inc.

Firm/Company

800 E. Arrow Hwy

Address

Covina, CA 91722

City/State and Zip code

dayra@herbatax.com

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

For further information concerning this matter, please call:

Dayra Salazar

Name of Person

at ( 626 ) 332-5900

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing 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. Nutri Center Inc.

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

Tello Nutri Center Inc.

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

2. New Jersey

(State or country under the law of which it is incorporated)

3. 80-0625411

(FEI number, if applicable)

4. 07/10/2010

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 7/1/2018

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 933 Albertville Ct. Kissimmee, FL 34759

(Principal office address)

933 Albertville Ct. Kissimmee, FL 34759

(Current mailing address)

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

Name: Eduardo Tello

Office Address: 933 Albertville Ct.

Kissimmee

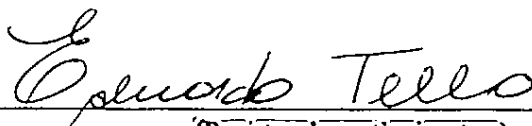
(City)

Florida 34759

(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.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: Eduardo Tello

Address: 933 Albertville Ct.

Kissimmee, FL 34759

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Eduardo Tello

Address: 933 Albertville Ct.

Kissimmee, FL 34759

Director: Nicolasa Tello

Address: 933 Albertville Ct.

Kissimmee, FL 34759

**B. OFFICERS**

President: Eduardo Tello

Address: 933 Albertville Ct.

Kissimmee, FL 34759

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Nicolasa Tello

Address: 933 Albertville Ct. Kissimmee, FL 34759

Treasurer: Nicolasa Tello

Address: 933 Albertville Ct. Kissimmee, FL 34759

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

12. Eduardo Tello  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 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. Eduardo Tello

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

FILED  
2018 AUG 27 AM 11:34  
SECRETARY OF STATE  
TALLAHASSEE, FL 32304

**STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY  
DIVISION OF REVENUE AND ENTERPRISE SERVICES  
LONG FORM STANDING WITH OFFICERS AND DIRECTORS**

**NUTRI CENTER INC**  
0400360153

*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on July 20, 2010.*

*As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.*

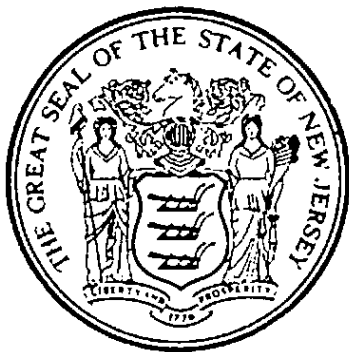
*I further certify that the registered agent and office are:*

**EDUARDO TELLO**  
197 HA SMITH ST.  
PERTH AMBOY, NJ 08861

*I further certify that as of the date of this certificate, the following were listed as officers/directors of this business on the last Annual Report filed in this office on June 19, 2017.*

**PRESIDENT**

**EDUARDO TELLO**  
184 FAYETTE ST  
PERTH AMBOY, NJ 08861



*IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 23rd day of May, 2018.*

**Elizabeth Maher Muoio**  
State Treasurer

Certificate Number : 6088530588

Verify this certificate online at

[https://www1.state.nj.us/TYTR\\_StandingCert/ISP/Verify\\_Cert.jsp](https://www1.state.nj.us/TYTR_StandingCert/ISP/Verify_Cert.jsp)