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(Requestor's Name)

(Address)

(Address)

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2018 SEP 13 AM 11:01
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TAX ASSISTANCE

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M. MILLIGAN
SEP 24 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Miss Isabelle A. 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:

Marcos C. Aparicio
Name of Person

Miss Isabelle A. Inc.
Firm/Company

PO Box 752
Address

Palacios, TX 77465
City/State and Zip code

maparicio@palacioscleaningservice.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Fran Callahan at (361) 404-0333
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

sent AK #1397 for 196.25 on 8/9/18

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.

RECEIVED
SECRETARY OF STATE
OFFICE OF CORPORATE
REGISTRATION
2018 SEP 13 AM 11:01

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1. Miss Luchella A. Inc.

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

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

2. Texas

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

3. PI-4277777

(FEI number, if applicable)

4. 10-31-2016

(Date of incorporation)

5. _____

(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. P.O. Box 758 Palacios, Tx 77465

(Principal office address)

Turning Basin, #2
Palacios, TX 77465

(Current mailing address, if different)

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

Name: Superior Seafoods, Inc.

Office Address: 5625 Causeway Blvd

Tampa, FL 33619

(City)

Florida

(Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation as 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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2010 SEP 13 AM 11:01
SECRETARY OF STATE
TREASURY DEPARTMENT

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

A. DIRECTORS

Chairman: _____
Address: _____

Vice Chairman: _____
Address: _____

Director: _____
Address: _____

Director: _____
Address: _____

B. OFFICERS

President: Maximo C. Aparicio
Address: PO Box 752
Palacios, TX 77465
Vice President: _____
Address: _____

Secretary: Chi Aparicio
Address: PO Box 752 Palacios, TX 77465
Treasurer: _____
Address: _____

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

12. [Signature]
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. Maximo C. Aparicio
(Typed or printed name and capacity of person signing application)



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for MISS ISABELLE A, INC. (file number 802567599), a Domestic For-Profit Corporation, was filed in this office on October 21, 2016.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on August 21, 2018.



A handwritten signature in black ink, appearing to read "R. Pablos".

Rolando B. Pablos
Secretary of State