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### **COVER LETTER**

TO:						
Division of Corporations  LE TUNNEL COMPANY						
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SUDJ	ECI	Name of	corporation	- must include suffix	· · · · · · · · · · · · · · · · · · ·	
Dear S	Sir or Madam:					
"Certi	ficate of Existence		of Good Stan	Authorization to Transading" and check are subset in Florida.		
	e return all corresp NS MALLIOS	oondence concernin	g this matter	to the following:		
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			Firm/Com	pany		
311 H	IAYWOOD DRIVE	<u> </u>		- ····· <del>·</del>		
			Addre			
PARA	MUS, NJ 07652		Addic	33		
ADON	NISMALLIOS@GI		City/State ar	nd Zip code		
		E-mail address:	(to be used f	or future annual report i	notification)	
For fu	erther information	concerning this ma	tter, please c	ali:		
ADONIS MALLIOS		212	5314481			
			t (		<del></del>	
	Name of Perso	n	Area Code	e Daytime Telep	hone 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			
Enclo	sed is a check for	the following amou	int:			
<b>₽</b> \$7	0.00 Filing Fee	□ \$78.75 Filing Certificate of		\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status &	

## 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. LE TUNNEL COMPANY 1. (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 JERSEY** 20-8590357 (FEI number, if applicable) (State or country under the law of which it is incorporated) 03/08/2007 (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 311 HAYWOOD DRIVE PARAMUS, NJ 07652 (Principal office address) (Current mailing address, if different) 8. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable) STAVROS MALLIOS Name: 2822 BROWARD RD Office Address: JACKSONVILLE (City) 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.

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.

(Registered agent's signature)

A. DIRECTORS **ADONIS MALLIOS** Chairman: 311 HAYWOOD DR PARAMUS, NJ 07652 Address: Vice Chairman: Address: \_\_\_\_ Address: **B. OFFICERS ADONIS MALLIOS** President: 311 HAYWOOD DR PARAMUS, NJ 07652 Address: \_\_ Vice President: Address: \_\_\_\_\_\_\_ Secretary: \_\_\_\_\_ Address: Address: \_\_\_\_\_ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. ADONIS MALLIOS PRESIDENT 13. \_\_\_\_\_ (Typed or printed name and capacity of person signing application)

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

# STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

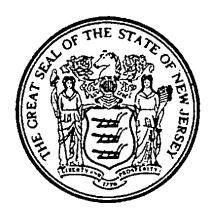
#### LE TUNNEL COMPANY 0400170719

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 March 08, 2007.

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:

ADONIS MALLIOS 311 HAYWOOD DR PARAMUS, NJ 07652



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 10th day of October, 2018

Elizabeth Maher Muoio State Treasurer

duk A Mun

Certificate Number: 6091904034

Verify this certificate online at

https://www1.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp