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COVER LETTER

TO: Registration Section			
Division of Corporations MISCIK PRINTING SERVIC	EC INC		
SUBJECT:	ES, INC		
	f corporation	- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Cor "Certificate of Existence," or "Certificate above referenced foreign corporation to tra	of Good Stan	ding" and check are sub	et Business in Florida," mitted to register the
Please return all correspondence concernit KAREN J. MISCIK	ng this matter	to the following:	
	Name of	Person	
MISCIK PRINTING SERVICES, INC			
	Firm/Com	pany	· · · · · · · · · · · · · · · · · · ·
10917 BULLRUSH DR		•	
	Addre	ess	
VENICE, FL 34293			
	City/State a	nd Zip code	·
miscikprinting@gmail.com	.	,	
E-mail address	: (to be used	for future annual report r	notification)
For further information concerning this m	atter, please o	call:	
KAREN J. MISCIK		454-4995	
Name of Person	at (Area Cod	Daytime Telep	hone Number
STREET/COURIER ADDRES	S:	MAILING A	DDRESS:
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
Clifton Building		P.O. Box 632° Tallahassee, F	
2661 Executive Center Circle Tallahassee, FL 32301		i andilassee, i	- J.
Enclosed is a check for the following amo	ount:		
■ \$70.00 Filing Fee	g Fee &	3 \$78.75 Filing Fee &	\$87.50 Filing Fee,
Certificate of	_	Certified Copy	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. MISCIK PRINTING SERVICE, 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) PENNSYLVANIA 23-2882010 2. (FEI number, if applicable) (State or country under the law of which it is incorporated) (Date of duration, if other than perpetual) (Date of incorporation) **OCTOBER 1, 2018** (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 10917 BULLRUSH DR VENICE, FL 34293 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) KAREN J. MISCIK Name: 10917 BULLRUSH DR Office Address: VENICE . 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.

11. Names and business addresses of officers and/or directors:		i	
A. DIRECTORS			
Chairman:			
Address:			
Address:			
Vice Chairman:			_
Address:			
Director:	<u></u>		
Address:			_
		=	
Director:			
Address:			
B. OFFICERS KAREN J. MISCIK			
President:	<u></u>	ᄝ	
10917 BULLRUSH DR Address:	NOV	3860 1338	
VENICE, FL 34293	2	05 12.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.	
	<u> </u>	2000 2000 2000 2000 2000 2000 2000 200	
Vice President:	<u>국</u>		<u> </u> _
Address:	-	STATE	_
	ω 	#K.	
Secretary:			
Address:		·	<u> </u>
Treasurer:			<u> </u>
Address:			
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or di	rector	S.	
12. Laun & Musch			
Signature of Director or Officer			Ī
The officer or director signing this document (and who is listed in number 11 above) affirms that the fact are true and that he or she is aware that false information submitted in a document to the Department of S	s state	d herei	n Le
a third degree felony as provided for in s.817.155, F.S.	nait t	onsinul	
KAREN J. MISCIK			
(Typed or printed name and capacity of person signing application)			Γ

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

11/26/2018

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

LDO HEREBY CERTIFY THAT.

MISCIK PRINTING SERVICE, INC.

is duly registered as a Pennsylvania Business Corporation under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

OF THE COALD PROPERTY OF THE COALD PROPERTY

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Acting Secretary of the Commonwealth

Certification Number: TSC181126202099-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify