

F18000005837

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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18 DEC 19 AM 10:11

FILED
18 DEC 19 PM 7:48
TALLAHASSEE, FLORIDA

K. SALY
DEC 20 2018

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 550357 8054174

AUTHORIZATION :

Spencer

COST LIMIT : \$ 70.00

ORDER DATE : December 18, 2018

ORDER TIME : 9:58 AM

ORDER NO. : 550357-005

CUSTOMER NO: 8054174

FOREIGN FILINGS

NAME: ACCOMPANY USA INC

☒ QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- ext # 62925

EXAMINER: _____

**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. ACCOMPANY USA INC
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co." or "Corp.")
2. NEW YORK 3. 46-1841307
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 01/18/2013 5. _____
(Date of incorporation) (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. 4245 LIVE OAK BLVD., DELRAY BEACH, FL 33445
(Principal office address)

(Current mailing address, if different)

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

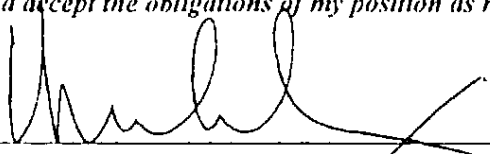
Name: HERB LEVY

Office Address: 4245 LIVE OAK BLVD.

DELRAY BEACH, Florida 33445
(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)

1. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to
Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction
of the law of which it is incorporated.

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

A. DIRECTORS

Chairman: MIAO MIAO LIN

Address: 1135 CENTRE DRIVE, UNIT K & L
CITY OF INDUSTRY, CA 91789

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: MIAO MIAO LIN

Address: 1135 CENTRE DRIVE, UNIT K & L
CITY OF INDUSTRY, CA 91789

Vice President: _____

Address: _____

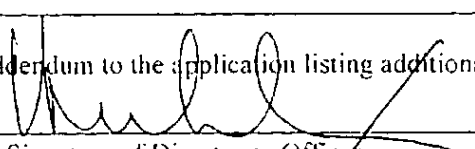
Secretary: KEN HOMMA

Address: 1135 CENTRE DRIVE, UNIT K & L, CITY OF INDUSTRY, CA 91789

Treasurer: HERB LEVY

Address: 4245 LIVE OAK BLVD., DELRAY BEACH, FL 33445

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 first degree felony as provided for in s.817.155, F.S.

HERB LEVY, Treasurer

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

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DEPT. OF STATE
TALLAHASSEE, FLORIDA

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of ACCOMPANY USA INC. was filed on 01/18/2013, 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.



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IN THE DEPARTMENT OF STATE
ALBANY, NEW YORK

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 06th day of December two
thousand and eighteen.*

A handwritten signature in cursive script, reading "Whitney Clark".

Whitney Clark
Deputy Secretary of State