

F18000005899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

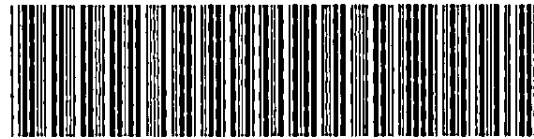
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 DEC 13 AM 10:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 27 2018
T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pine Cove Homes Corp.

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:

Julie Naim, Esq.

Name of Person

McCarty, Naim, Focks & Keeter, PLLC

Firm/Company

2630A NW 41st Street

Address

Gainesville, FL 32606

City/State and Zip code

FNKeystone@earthlink.net

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

For further information concerning this matter, please call:

Julie Naim, Esq.

352 240-1226

at ()

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:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> \$70.00 Filing Fee | <input checked="" type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$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.*

- Pine Cove Homes Corp.
1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. Delaware
(State or country under the law of which it is incorporated)
3. 47-202 0667
(FEI number, if applicable)
4. 4/19/2018
(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. 275 POST RD E, STE 10 # 5189, WESTPONT, CT 06881
(Principal office address)
- SAME
(Current mailing address, if different)

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

Name: Julie Naim, Esq.

Office Address: 2630A NW 41st Street

Gainesville

(City)

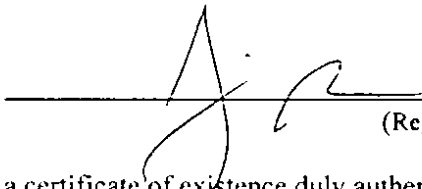
, Florida

32606

(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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TALLAHASSEE, FLORIDA

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

A. DIRECTORS

Chairman: FRANK NOCITO

Address: 275 POST RD E, STE 10 #5189
WESTPONT, CT 06881

Vice Chairman: MALCOLM TAUB

Address: 30 PARK AVENUE, STE 18F
NEW YORK, NY 10016

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: FRANK NOCITO

Address: 275 POST RD E, STE 10 #5189
WESTPONT, CT 06881

Vice President: MALCOLM TAUB

Address: 30 PARK AVENUE, STE 18F
NEW YORK, NY 10016

Secretary: FRANK NOCITO

Address: SEE ABOVE

Treasurer: MALCOLM TAUB

Address: SEE ABOVE

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STATE
TALLAHASSEE FLORIDA

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

12. Frank Nocito
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. FRANK NOCITO


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

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "PINE COVE HOMES CORP." IS DULY
INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS
OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF DECEMBER, A.D. 2018.


Jeffrey W. Bullock, Secretary of State

6851444 8300

SR# 20188076969

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 204069690

Date: 12-11-18