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2019 JAN - 8 PM 5:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3/1/19

COVER LETTER

TO: Registration Section
Division of Corporations
SUBJECT: CURZIO RESEARCH, 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:

Simon Riveles

Name of Person

Riveles Wahab, L.L.P

Firm/Company

60 Broad Street, 25th Floor, Suite 2510B

Address

NEW YORK, NY 10004

City/State and Zip code

Simon@riveleslawgroup.com

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

For further information concerning this matter, please call:

Simon Riveles

212

785-0076

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:

- \$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

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. CURZIO RESEARCH, 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)

2. DELAWARE 3.
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. JANUARY 2, 2019 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. 2900 EASTWIND DRIVE, FERNANDINA BEACH, FL 32034
(Principal office address)

(Current mailing address, if different)

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

Name: FRANK CURZIO
Office Address: 2900 EASTWIND DRIVE
FERNANDINA BEACH, Florida 32034
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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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.

[Handwritten signature]
(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:

A. DIRECTORS

Chairman: FRANK CURZIO

Address: 2900 EASTWIND DRIVE, FERNANDINA BEACH, FL 32034

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: FRANK CURZIO

Address: 2900 EASTWIND DRIVE, FERNANDINA BEACH, FL 32034

Vice President: _____

Address: _____

Secretary: FRANK CURZIO

Address: 2900 EASTWIND DRIVE, FERNANDINA BEACH, FL 32034

Treasurer: FRANK CURZIO

Address: 2900 EASTWIND DRIVE, FERNANDINA BEACH, FL 32034

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

12. *Frank Curzio*

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 Curzio

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

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CURZIO RESEARCH, INC." 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 THIRD DAY OF JANUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CURZIO RESEARCH, INC." WAS INCORPORATED ON THE SECOND DAY OF JANUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.



7219539 8300

SR# 20190035035

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202010177

Date: 01-03-19