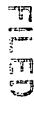
(Requestor's Name)								
(Address)								
(Address)								
(13.32)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								
W1900003568 NO								

Office Use Only



200321608792



01/08/19--01013--035 **75.55

TNAIME



January 11, 2019

NEVIS ASSOCIATES, INC. ALLAN C. MOWAT 17127 SE 111TH TERRACE ROAD SUMMERFIELD, FL 34491 US

SUBJECT: NEVIS ASSOCIATES, INC.

Ref. Number: W19000003568

We have received your document for NEVIS ASSOCIATES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sterling R Abney Regulatory Specialist II

Letter Number: 919A00000875

www.sunbiz.org

Division of Companytions D.O. DOV 6207 Tellaharan Elavida 2021

COVER LETTER

то:	Registration Section Division of Corporations					
SUBJ	ECT: Nevis Associates, Inc.					
	Name	of corporation	- must include suffix			
Dear S	Sir or Madam:					
"Certi	nclosed "Application by Foreign C ficate of Existence," or "Certifica referenced foreign corporation to	te of Good Stan	ding" and check are sul	net Business in Florida," omitted to register the		
Please	return all correspondence concer-	ning this matter	to the following:			
Allan (C Mowat					
		Name of	Person			
Nevis .	Associates, Inc.					
		Firm/Com	pany			
17127	SE 111th Terrace Road					
	· ·	Addre	SS	_		
Summe	erfield, FL 34491					
		City/State ar	ıd Zip code			
allan(ii)	nevisassociates.com					
	E-mail addres	ss: (to be used t	or future annual report	notification)		
For fur	rther information concerning this	matter, please c	all:			
Allan A	Annat	201	(15.351)			
Allan Mowat at (at (201 Area Code) 615-3511 Daytime Telep	hone Number		
			bayame Telep	none rumoer		
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			
Enclos	ed is a check for the following an	iount:				
⊠ \$70	0.00 Filing Fee		\$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.	Nevis Associates, 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 nar	me a	adopted for the purpose of transacting b	usiness in	Florida	1)				
2.	New Jersey	3.	3. 41-2175719							
	(State or country under the law of which it is incorporated)		(FEI number, if applicable)							
4.	04-27-05	5.								
	(Date of incorporation)			(Date of duration, if other than perpetual)						
6	12-01-18									
7.			a Florida, if prior to registration) 502, F.S., to determine penalty liability)							
	(Pri	ncip	oal office address)		-	_				
	(Current ma	ailir	ng address, if different)	· · · · · · · · · · · · · · · · · · ·	2019	 -				
8.	Name and <u>street address</u> of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	LLANASSEE. F	2019 FEB -4	T.				
	Name: Allan C Mowat			.> G: G: 11		77				
O	ffice Address: 17127 SE 111th Terrace Road	_			PM 4: 1	O				
	Summerfield		, Florida <u>34491</u>	17)	6					
	(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.

Alla = Mowa (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.

A. DIRECTORS

Chairman: Allan C Mowat

Address: 17127 SE 111th Terrace Road
Summerfield, FL 34491

Vice Chairman:
Address:

Director:
Address:

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

B. OFFICERS

Address: ____

Treasurer: ____

Address:

President: Allan C Mowat

Address: 17127 SE 111th Terrace Road

Summerfield, FL 34491

Vice President: 4

Address: 5

Secretary: 5

Secretary: 5

Address: 6

Allan C Mowat

Address: 6

Address: 6

Allan C Mowat

Address: 6

Address: 6

Address: 7

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

12. Alla e mous

Address:

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. Allan C Mowat

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

NEVIS ASSOCIATES, INC.

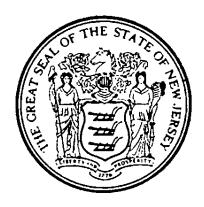
0100944708

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 April 27, 2005.

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:

ALLAN C. MOWAT 157 ORCHARD PLACE RAMSEY, NJ 07446



IN TESTIMONY WHEREOF. I have hereunto set my hand and affixed my Official Seal at Trenton, this 21st day of January, 2019

dur of New

Elizabeth Maher Muoio State Treasurer

Certificate Number: 6094388553

Verify this certificate online at

https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp