

(Requestor's Name)							
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(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
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Office Use Only



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SEGRETARY OF STATE

2019 FEB 21 P IC: 05

FILED



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 8, 2019

LISA BLUE 2787 NEW TAMPA HWY LAKELAND, FL 33815

SUBJECT: FITEQ, INC.

Ref. Number: W19000022323

We have received your document for FITEQ, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$1,250.00.

The name and title of the person signing the document must be noted beneath or opposite the signature.

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.

Dionne M Scott Regulatory Specialist II

Letter Number: 919A00004733

B David Patterson

## **COVER LETTER**

TO:	Registration Se Division of Co							
SUBJ	FCT:	FITEQ	7	nc.				
SOD,				must include suffix				_
Dear S	ir or Madam:							
"Certif	icate of Existence	tion by Foreign Corporation ee," or "Certificate of Good gn corporation to transact bu	Stanc	ling" and check are sul				
Please	return all corresp	pondence concerning this m	atter	to the following:				
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For fur	ther information	concerning this matter, plea	ase ca	II:				
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	Name of Perso	on Area	Code	Daytime Telep	hone Nun	nber	_	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314					
r~ ,	Tallahassee, Fl							
Enclose	ed is a check for	the following amount:			/			
☐ \$70	0.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	0	\$78.75 Filing Fee & Certified Copy	Сег	.50 Fili tificate tified C	of Statu	ıs &

## 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. (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) Delaware.

(State or country under the law of which it is incorporated)

(FEI number, if applicable)

(Date of incorporation)

(Date of duration, if other than perpetual) 04 29,2014 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 2769 New Tampa Huy, Lakeland, FC 3381-5 (Principal office address) New Tampa Harry, Lakeland, FL (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee (City) 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. Corporation Service Company

Ran Ramon Cota, Assistant Secretary (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: Address: \_\_\_\_\_\_\_\_\_ Vice Chairman: Address: Address: \_\_\_\_\_ **B. OFFICERS** President: Address: \_\_\_\_ 27 Vice President: Lakeland, FL 33815 Secretary: \_\_ Address: Address: **NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Dikector 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

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

David Patterson P

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

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "FITEQ, 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 FOURTEENTH DAY OF FEBRUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FITEQ, INC." WAS INCORPORATED ON THE TWENTY-FOURTH DAY OF JUNE, A.D. 2009.

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

2019 FEB 21 P ID: 05



Authentication: 202262816

Date: 02-14-19

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