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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : 120080000067 Phone

: (845)425-0077

Fax Number

: (845)818-3588

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FOREIGN PROFIT/NONPROFIT CORPORATION

MBox Supply Inc

Certificate of Status	0				
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MAY 10 2019

Electronic Filing Menu

Corporate Filing Menu

Help

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. MBox Supply Inc. 1. (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) 83-4199856 2. (FEI number, if applicable) (State or country under the law of which it is incorporated) (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 55 South 11 St, #B2, Brooklyn, NY 11249 (Principal office address) (Current mailing address, if different) ら 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Voorp Services, LLC Name: 5011 South State Road 7, Suite 106 Office Address: Davic Florida

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.



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.

н.	Numes	and	business	addresses	oť	officers	and/or	directors:
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A. DIRECTORS	
Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
Director:	
Address:	> == 1
B. OFFICERS Joseph Silberstein	3355Vt
President: 42 Clymer St Address:	
Brooklyn, NY 11249	<u>Β΄. ω</u>
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application li	sting additional officers and/or directors.
Signature of Director or Off The officer or director signing this document (and who is listed in number true and that he or she is aware that false information submitted in a a third degree felony as provided for in s.817.155, F.S. Joseph Silberstein, President	per 1 (above) affirms that the facts stated herein
(Typed or printed name and capacity of person	signing application)

05/09/2019 15:41 (FAX)845 818 3588 P.002/005

State of New York Department of State ss:

I hereby certify, that the Certificate of Incorporation of MBOX SUPPLY INC was filed on 03/29/2019, 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.

I further certify that no other documents have been filed by such corporation.



201905010316 * HD

Witness my hand and the official seal of the Department of State at the City of Albany, this 30th day of April two thousand and nineteen.

Whitney Clark Deputy Secretary of State