

FR000000296

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

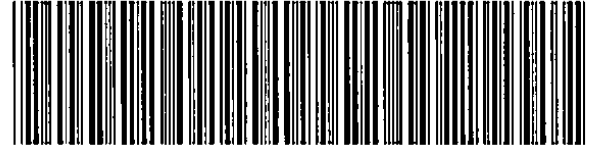
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/23/19--01025 -011 **78.75

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MAY 28 2019

FILED
19 JUN 26 PM 4:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

B KINSEY
JUN 27 2019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 7, 2019

LAVIE ORENSTEIN
5115 UPSON AVENUE
DE LEON SPRINGS, FL 32130

SUBJECT: BST STRATEGIES INC
Ref. Number: W19000054774

We have received your document for BST STRATEGIES INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

✓ ✓
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.

Brooke N Kinsey
Regulatory Specialist II

Letter Number: 719A00011455

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BST STRATEGIES 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:

LAVIE ORENSTEIN

_____ BST STRATEGIES INC	_____ Name of Person
_____ 5115 UPSON AVENUE	_____ Firm/Company
_____ DE LEON SPRINGS, FLORIDA, 32130	_____ Address
_____ AISHENKO@BSTSTRATEGIES.COM	_____ City/State and Zip code
_____ E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

LAVIE ORENSTEIN	305	924-6222
_____ Name of Person	at (_____)	_____ Daytime Telephone Number
(OWNER)		

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 |
|---|---|---|---|

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

**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.*

BST STRATEGIES INC

1. BST STRATEGIES 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. NEW YORK 3. 82-3744264
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/19/2017 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. 5115 UPSON AVENUE, DE LEON SPRINGS, FLORIDA 32130
(Principal office address)

PO BOX 1102 DE LEON SPRINGS FLORIDA 32130
(Current mailing address, if different)

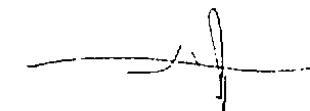
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: LAVIE ORENSTEIN

Office Address: 5115 UPSON AVENUE
DE LEON SPRINGS, Florida 32130
(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 **STILL HAVE 3 DAYS LEFT TO FILE** in this capacity. 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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: LAVIE ORENSTEIN

Address: 5115 UPSON AVENUE, DE LEON SPRINGS, FLORIDA 32130

Director: _____

Address: _____

B. OFFICERS

President: LAVIE ORENSTEIN

Address: 5115 UPSON AVENUE, DE LEON SPRINGS, FLORIDA 32130

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

12. _____

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.

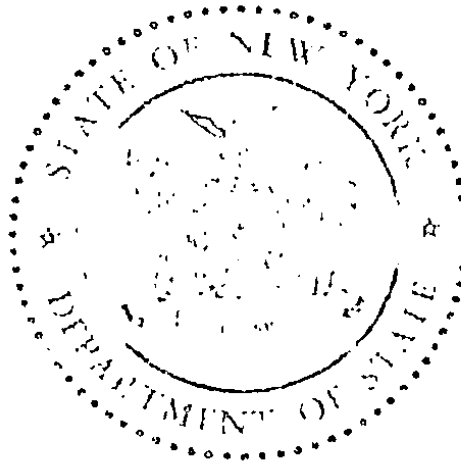
13. LAVIE ORENSTEIN, OWNER AND OFFICER

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

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of BST STRATEGI INC was filed on 12/19/2017, with perpetual duration, and that a dilige. examination has been made of the Corporate index for documents filed wi this Department for a certificate, order, or record of a dissolution, a 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.



WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 05th day of March two
thousand and nineteen.

A handwritten signature in cursive script, appearing to read "Whitney Clark".

Whitney Clark
Deputy Secretary of State