

F19000003012

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

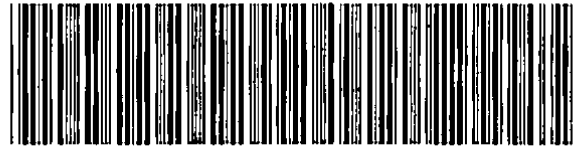
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JUN 17 2019

2019 JUN 17 PM 12:35
SECRETARY OF STATE
DIVISION OF CORPORATIONS

JUL 02 2019

M. SOLOMON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PRESTIGE SERVICES CORP
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:

Irene Milani

Name of Person

PRESTIGE BRANDS, INC.

Firm/Company

660 WHITE PLAINS ROAD, 2nd FL

Address

TARRYTOWN, NEW YORK 10591

City/State and Zip code

imilani@prestigebrands.com

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

For further information concerning this matter, please call:

Irene Milani

Name of Person

at (914) 524-6879

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. PRESTIGE SERVICES CORP
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. DELAWARE 3. -
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. AUG 7, 2007 5. -
(Date of incorporation) (Date of duration, if other than perpetual)
6. MAY 13, 2019
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. GEO WHITE PLAINS RD, 200 FT TARRYTOWN, NY 10591
(Principal office address)
- (Current mailing address, if different)

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

Name: LIBRA I SERVICES INC

Office Address: 1200 SOUTH PINE ISLAND RD

Plantation

(City)

Florida 33324

(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.



(Registered agent's signature)

DOAN CTSW-11, Asst. Secy

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.

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

A. DIRECTORS

Chairman: RONALD M. LOMBARDI

Address: 660 WHITE PLAINS RD., 2ND FL
TARRYTOWN, NY 10591

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: RONALD M. LOMBARDI

Address: 660 WHITE PLAINS RD. 2ND FL
TARRYTOWN, NY 10591

Vice President: _____

Address: _____

Secretary: WILLIAM P. PICCOLI

Address: 660 WHITE PLAINS RD., 2ND FL, TARRYTOWN, NY 10591

Treasurer: CHRISTINE SACCO

Address: 660 WHITE PLAINS RD., 2ND FL TARRYTOWN, NY 10591

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. WILLIAM P. PICCOLI, SECRETARY

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

2018 JUN 17 PM 12:35
SECRETARY OF STATE
OFFICE OF THE CLERK

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "PRESTIGE SERVICES CORP." 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 TWENTY-THIRD DAY OF MAY, A.D. 2019.



4387116 8300

SR# 20194150198

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

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

Jeffrey W. Bullock, Secretary of State

Authentication: 202884272

Date: 05-23-19