

FL1900000341

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

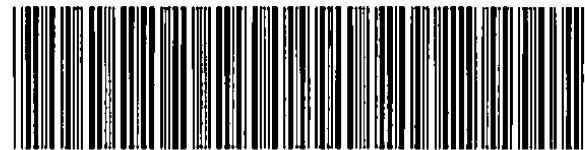
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(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

Y SCOTT

JUL 24 2019



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 2, 2019

ERIC P. ELSEA  
516 CHESTNUT ST.  
SUITE:100  
CHATTANOOGA, TN 37402

SUBJECT: ALLEGRO BUSINESS DEVELOPMENT, INC.  
Ref. Number: W19000061498

We have received your document for ALLEGRO BUSINESS DEVELOPMENT, 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):

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.

Yvette Scott  
Document Specialist II

Letter Number: 819A00013455

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JUL 22 2019

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ALLEGRO BUSINESS DEVELOPMENT, 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:

ERIC P ELSEA

**Name of Person**

FINANCIAL MANAGEMENT NETWORK, INC.

**Firm/Company**

516 CHESTNUT ST. SUITE 100

### Address

CHATTANOOGA, TN 37402

City/State and Zip code

eric@fmn-inc.com

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

For further information concerning this matter, please call:

ERIC P ELSEA at ( 423 ) 265-0119  
Name of Person      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. ALLEGRO BUSINESS DEVELOPMENT, 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. TENNESSEE 3. 20-5288585

(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. JULY 31, 1976 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. 1418 S MOODY AVE, TAMPA, FL 33629

(Principal office address)

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TALLAHASSEE, FLORIDA

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

Name: FRANK GREBOWSKI

Office Address: 1418 S MOODY AVE

TAMPA , Florida 33629  
(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, 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: FRANK GREBOWSKI

Address: 516 CHESTNUT ST, SUITE 100

CHATTANOOGA, TN 37402

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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**B. OFFICERS**

President: FRANK GREBOWSKI

Address: 516 CHESTNUT ST, SUITE 100

CHATTANOOGA, TN 37402

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: JAIMIE GREBOWSKI

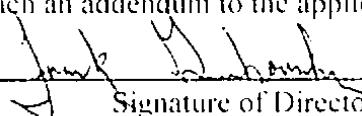
Address: 516 CHESTNUT ST, SUITE 100, CHATTANOOGA, TN 37402

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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

12. \_\_\_\_\_

 Frank Grebowski PRESIDENT  
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. FRANK GREBOWSKI, PRESIDENT

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



Tre Hargett  
Secretary of State

## Division of Business Services

### Department of State

State of Tennessee

312 Rosa L. Parks AVE. 6th FL  
Nashville, TN 37243-1102

FLORIDA SECRETARY OF STATE  
REGISTRATION SECTION/DIVISION OF CORPORATIONS  
PO BOX 6327  
TALLAHASSEE, FL 32314

June 13, 2019

Request Type: Certificate of Existence/Authorization

Issuance Date: 06/13/2019

Request #: 0319657

Copies Requested: 1

#### Document Receipt

Receipt #: 004865587

Filing Fee: \$20.00

Payment-Credit Card - State Payment Center - CC #: 3760174268

FECCR: TALLAHASSEE \$20.00

Regarding: ALLEGRO BUSINESS DEVELOPMENT INC.

Filing Type: For-profit Corporation - Domestic

Control #: 526252

Formation/Qualification Date: 07/31/2006

Date Formed: 07/31/2006

Status: Active

Formation Locale: TENNESSEE

Duration Term: Perpetual

Inactive Date:

Business County: HAMILTON COUNTY

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TALLAHASSEE, FLORIDA  
JUL 22 2019  
11:32 AM

#### CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

#### ALLEGRO BUSINESS DEVELOPMENT INC.

- \* is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above;
- \* has paid all fees, interest, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- \* has filed the most recent annual report required with this office;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett  
Secretary of State

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