

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000235182 3)))



H190002351823ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this and page. Doing so will generate another cover sheet. page. Doing so will generate another cover sheet.

70:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : USACORP INC. Account Number : 120130000019

Phone : (718)362-4789 Fax Number : (718)408-2550

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: adirenterprises@gmail.com

## FOREIGN PROFIT/NONPROFIT CORPORATION

## Adir Enterprises Inc.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

Electronic Filing Menu Corporate Filing Menu

Help

## \*\*( (H19000235182-31) ) 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.

(If name unavails	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in Florida)
New Yorl	· · · · · · · · · · · · · · · · · · ·	
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)
04/28/20	15 <u> </u>	Perpetual
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
		Florida, if prior to registration) 502, F.S., to determine penalty hability)
00110121	(Principal office add	· · · · · · · · · · · · · · · · · · ·
60 RUTLE	EDGE ST STE 206, BROOK	(LYN, NEW YORK, 11249 g
	(Current mailing add	ress) V
Wholesa	le Sales	
Wholesa		ountry to be carried out in state of Florida)
(Purpose(s	) of corporation authorized in home state or ec	
(Purpose(s	et address of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)
(Purpose(s	) of corporation authorized in home state or ec	D. Box <u>NOT</u> acceptable)
(Purposets Name and street Name:	et address of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)
(Purposets Name and street Name:	of corporation authorized in home state or ecest address of Florida registered agent: (P.CSHLOMA FELBERBAUM	D. Box <u>NOT</u> acceptable)  M  Rd
(Purposets  Name and street  Name:	of corporation authorized in home state or ecet address of Florida registered agent: (P.G. SHLOMA FELBERBAUM 7653 Magnolia Homes F	D. Box <u>NOT</u> acceptable)
(Purposets  Name and street Name:  Office Address:  O. Registered at laving been names ignated in this parter to contribute to contribute agree	of corporation authorized in home state or ecet address of Florida registered agent: (P.C. SHLOMA FELBERBAUM 7653 Magnolia Homes F. Lockhart (City)  gent's acceptance: seed as registered agent and to accept serve application, I hereby accept the appoint.	D. Box NOT acceptable)  Ad  Rd , Florida 32810  (Zip code)  ice of process for the above stated corporation at the part as registered agent and agree to act in this capacelative to the proper and complete performance of medical complete sections.
(Purposets Name and <u>stree</u> Name:  Office Address:  O. Registered a  Inving been namesignated in this  orther agree to c	of corporation authorized in home state or ecet address of Florida registered agent: (P.6 SHLOMA FELBERBAUM 7653 Magnolia Homes Fellockhart (City)  gent's acceptance: (City)  gent's acceptance: application, I hereby accept the appoint omply with the provisions of all statutes.	D. Box NOT acceptable)  Ad  Rd , Florida 32810  (Zip code)  ice of process for the above stated corporation at the pment as registered agent and agree to act in this capacitative to the proper and complete performance of my position as registered agent.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

(((H19000235182 3)))

under the law of which it is incorporated.

(((H19000235182 3)))

A. DIRECTORS

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

·»;	
hairman:	
s:	
SHLOMA FELBERBAUM	
60 RUTLEDGE ST STE 206	
BROOKLYN, NEW YORK, 11249	7. D
л:	ــــــــــــــــــــــــــــــــــــــ
Si	AS: 1
	ENC PRINCE
FFICERS	4: 5
SHLOMA FELBERBAUM	<b>20</b> 20 20 20 20 20 20 20 20 20 20 20 20 20
60 RUTLEDGE ST STE 206	
BROOKLYN, NEW YORK, 11249	
resident:	<u></u>
s:	
ity:	
»:	1,000
rer:	
s;	
E: If necessary, you may attach an addendum to the application fistings/ SHLOMA FELBERBAUM	g additional officers and/or directors.

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

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

14. SHLOMA FELBERBAUM, PRESIDENT

(((H19000235182 3)))

## State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of ADIR ENTERPRISES INC was filed on 04/28/2015, 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.

The Biennial Statement is past due.

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



201908040493 · FW

Witness my hand and the official seal of the Department of State at the City of Albany, this 05th day of August Etwo thousand and nineteen.

Braden Co Hydra

Brendan C. Hughes Deputy Secretary of State