F1900003678

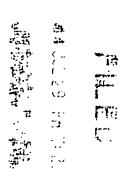
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special Instructions to Filing Officer: 04180 PT 800. W1900005875 Trans. date #46 redacted by entity

Office Use Only



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06/13/19--01010--009 **70.00



Z BROWN AUG 0 9 2019



June 21, 2019

ZAYA GIVARGIDZE PO BOX 470458 CELEBRATION, FL 34747-0458 US

SUBJECT: CARLY'S ICE CREAM CORP.

Ref. Number: W19000058750

We have received your document for CARLY'S ICE CREAM CORP. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$800.00.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Zakiya M Brown Regulatory Specialist II

Letter Number: 019A00012598

COVER LETTER

TO:	Registration Section				
	Division of Corpor	ations			
O# 1#5 #	Carly's Ice C	ream Corp.			
SUBJ	ECT:	Name of corporat	ion mu	rt include suffix	
		ivanie of corporat	.1011 - 111us	a menude surrix	
Dear S	Sir or Madam:				
"Certi	ficate of Existence,"	by Foreign Corporation or "Certificate of Good Sorporation to transact bus	Standing"	and check are sub	
	return all correspond Givargidze	ence concerning this ma	tter to the	e following:	
	<u> </u>	Name	of Persor		
Carly'	s Ice Cream Corp.				
		Firm/C	Company		·····
P.O. E	30x 470458		' -		
		Α.	ldress		
Celeb	ration, Florida 34747-0		iuress		
		City/Stat	e and Zip	code	
ZGPro	operties@yahoo.com				
		-mail address: (to be use	ed for fut	ure annual report i	notification)
For fur	ther information con	cerning this matter, pleas	se call:		
Zaya Givargidze		516	516 661-1727		
	Name of Person	at (Davis Tales	1 N
	Name of Person	Area C	.oae	Daytime Telep	none Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	Tallahassee, FL 32			rananassee, r	1. 32314
Enclos	ed is a check for the	following amount:			
= \$70	0.00 Filing Fee 🛮 🗖	\$78.75 Filing Fee & Certificate of Status		75 Filing Fee & ified 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.

	Corp," "Inc," "Co," or "Corp.")							
Carly's Ice Cre	am Corp of Florida							
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) NEW YORK 11-2878084 (State or country under the law of which it is incorporated) (FEI number, if applicable)								
01/28/1999								
(Date	of incorporation)	(Date of duration, if ot	(Date of duration, if other than perpetual)					
	(SEE SECTIONS 607.1501 & 607.150 Pkwy, Kissimmee, Fl. 34744	, -, , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	Pkwy, Kissimmee, Fl. 34744 (Principa	l office address)						
	Pkwy, Kissimmee, Fl. 34744 (Principa							
	Pkwy, Kissimmee, Fl. 34744 (Principa	l office address)	- 14					
PO Box 470458	Pkwy, Kissimmee, Fl. 34744 (Principal) (Current mailing) et address of Florida registered agent: (P.O.	d office address) g address, if different)	- 14					
PO Box 470458	Pkwy, Kissimmee, Fl. 34744 (Principal) (Current mailing) et address of Florida registered agent: (P.O. Zaya Givargidze	g address, if different) Box NOT acceptable)	- 14					
PO Box 470458 Name and street Name:	(Principal) (Current mailing) et address of Florida registered agent: (P.O. Zaya Givargidze) 1400 E. Osceola Pkwy	address, if different) Box NOT acceptable)						
PO Box 470458 Name and street Name:	Pkwy, Kissimmee, Fl. 34744 (Principal Current mailing et address of Florida registered agent: (P.O. Zaya Givargidze 1400 E. Osceola Pkwy Kissimmee	address, if different) Box NOT acceptable)	- 14					
PO Box 470458 Name and stree	(Principal) (Current mailing) et address of Florida registered agent: (P.O. Zaya Givargidze) 1400 E. Osceola Pkwy	address, if different) Box NOT acceptable)	- 14					

eduties, 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.

11. Names and business addresses of officers and/or directors:			
A. DIRECTORS			
Chairman:			
Address:			
Vice Chairman:			
Address:			
Director:			
Address:		_	
		_	
Disastura			-
Director:			
Address:			
		_	
B. OFFICERS Zaya Givargidze	25 N.C.	æ	•
President:	(recij	its	E ;
Address:		f - Ga Vat	Statement Communication Commun
	1 .		-
Vice President:		·÷	<u> </u>
Address:	다. 라이	L',	-
Secretary:			
Address:			
Treasurer:			·
Address:			 .
NOTE: If necessary, you may attach an addendum to the application listing additional officers			ors.
		C	
The officer or director signing this document (and who is listed in number 11 above) affirms the are true and that he or she is aware that false information submitted in a document to the Depart			
a third degree felony as provided for in s.817.155. F.S. Zaya Givargidze as President			
13. (Typed or printed name and capacity of person signing application)			

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of CARLY'S ICE CREAM CORP. was filed on 01/28/1999, 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.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 12th day of July two thousand and nineteen.

Brada C Hydra

Brendan C Hughes
Executive Deputy Secretary of State