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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

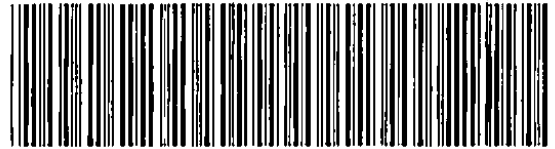
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

2019 OCT 17 PM 4:47

2019 OCT 17

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✓

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 958592 7548384

AUTHORIZATION :

COST LIMIT : \$ 70.00

ORDER DATE : October 11, 2019

ORDER TIME : 9:30 AM

ORDER NO. : 958592-025

CUSTOMER NO: 7548384

2019 OCT 17 PM 4:47
TALLAHASSEE, FL 32301

FOREIGN FILINGS

NAME: GABBY INSTALLATION SERVICES,
INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT# 62968

EXAMINER: _____

**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.*

Gabby Installation Services, Inc.

1. _____
(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. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 10/11/2019 5. perpetual
(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. 844 Alton Road, Suite 3, Miami Beach, FL, 33139
(Principal office address)
- _____ (Current mailing address, if different)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(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 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 duties, and I am familiar with and accept the obligations of my position as registered agent.

Corporation Service Company

By: _____

(Registered agent's signature)

Roxanne Turner
Asst. Vice President

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: Avi Cohen ✓

Address: 844 Alton Road Suite 3, Miami Beach FL 33139

Director: Jill Witter ✓

Address: 844 Alton Road Suite 3, Miami Beach FL 33139

B. OFFICERS

President: Avi Cohen ✓

Address: 844 Alton Road Suite 3, Miami Beach FL 33139

Vice President: _____

Address: _____

Secretary: Jill Witter ✓

Address: 844 Alton Road Suite 3, Miami Beach FL 33139

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 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. Avi Cohen, President

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

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TALLAHASSEE, FLORIDA



Tre Hargett
Secretary of State

Division of Business Service
Department of State
State of Tennessee
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

CORPORATION SERVICE COMPANY
CORPORATION SERVICE SERVICE COMPANY
251 LITTLE FALLS DRIVE
WILMINGTON, DE 19808

October 14,

Request Type: Certificate of Existence/Authorization
Request #: 0334162

Issuance Date: 10/14/2019
Copies Requested: 1

Document Receipt

Receipt #: 005061052

Filing Fee: \$2
2019 OCT 17
\$2

Payment-Credit Card - State Payment Center - CC #: 3767485749

Regarding: Gabby Installation Services, Inc.
Filing Type: For-profit Corporation - Domestic
Formation/Qualification Date: 10/14/2019
Status: Active
Duration Term: Perpetual
Business County:

Control #: 1056624
Date Formed: 10/14/2019
Formation Location: TENNESSEE
Inactive Date:

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

Gabby Installation Services, Inc.

- * is a Corporation duly incorporated under the law of this State with a date of incorporation and a 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 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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