

F190000041803

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

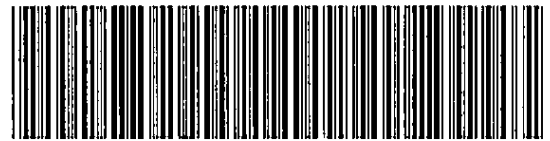
(Business Entity Name)

(Document Number)

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

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OCT 23 2019

## COVER LETTER

**TO:** Registration Section  
Division of Corporations  
BLOC DISTRIBUTION INC

**SUBJECT:** \_\_\_\_\_  
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:  
JB ROTH

ROTH LAW FIRM PL	Name of Person
6100 GREENLAND ROAD, SUITE 604	Firm/Company
JACKSONVILLE, FL 32258	Address
JB@ROTHLAWFIRM.NET	City/State and Zip code
E-mail address: (to be used for future annual report notification)	

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For further information concerning this matter, please call:

JB ROTH	904	595-7900
_____	at (_____) _____	
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.

BLOC DISTRIBUTION 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)  
NORTH CAROLINA 82-4215886

2. \_\_\_\_\_ 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)  
10/18/18

4. \_\_\_\_\_ 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)  
03/20/19

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  
909 EHRINGHAUS STREET, ELIZABETH CITY, NC 27909

7. \_\_\_\_\_  
(Principal office address)

\_\_\_\_\_  
(Current mailing address, if different)

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

ROTH LAW FIRM PL

Name:

6100 GREENLAND ROAD, SUITE 604

Office Address:

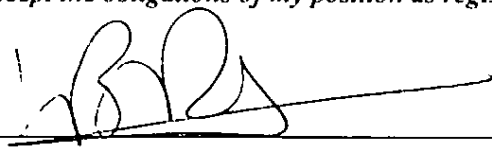
JACKSONVILLE

32258

\_\_\_\_\_, Florida \_\_\_\_\_  
(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. 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)

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**

FREDRIK NILSSON

Chairman:

909 EHRINGHAUS STREET

Address:

ELIZABETH CITY, NC 27909

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

**B. OFFICERS**

FREDRIK NILSSON

President:

909 EHRINGHAUS STREET

Address:

ELIZABETH CITY, NC 27909

Vice President:

Address:

Secretary:

Address:

Treasurer:

Address:

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

12.

*Fredrik Nilsson*

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.

FREDRIK NILSSON

13.

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

2019 Oct 15 PM 5:06



# NORTH CAROLINA

## Department of the Secretary of State

### CERTIFICATE OF EXISTENCE

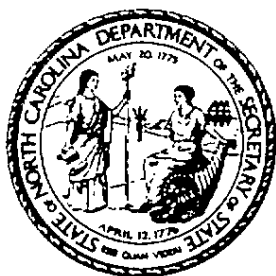
I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

### **BLOC DISTRIBUTION INC**

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 18th day of October, 2018, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

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Scan to verify online.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 26th day of September, 2019.

*Elaine F. Marshall*

Secretary of State

## Business Corporation

Legal Name  
BLOC DISTRIBUTION INC

## Information

SosId: 1760570  
Status: Current-Active  
Annual Report Status: Current  
Citizenship: Domestic  
Date Formed: 10/18/2018  
Fiscal Month: December  
Registered Agent: Clagon, Tanya

## Addresses

Reg Office	Reg Mailing	Mailing
907 W Ehringhaus Street	907 W Ehringhaus Street	909 W Ehringhaus Street
Elizabeth City, NC 27909	Elizabeth City, NC 27909	Elizabeth City, NC 27909

Principal Office  
909 W Ehringhaus Street  
Elizabeth City, NC 27909

## Officers

Chief Executive Officer  
FREDRIK NILSSON  
909 W EHRINGHAUS STREET  
ELIZABETH CITY NC 27909

## Stock

Class: Common  
Shares: 100  
No Par Value: Yes

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WILLIAMSON  
COUNTY  
CLERK