(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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NOV 1.3 2013

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee. FL. 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195	
REFERENCE : 040574 4707755	
AUTHORIZATION: Spelle man	
COST LIMIT : \$ 70.00	
ORDER DATE: November 8, 2019	
ORDER TIME : 9:07 AM	
ORDER NO. : 040574-010	
CUSTOMER NO: 4707755	20
	2015 1
FOREIGN FILINGS	. 12
NAME: HFC II, INC.	FT11: 24
XXXX QUALIFICATION (TYPE: CO)	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Kadesha Roberson EXT# 62980	

EXAMINER:

COVER LETTER

TO: Registration Se					
HFC II, I	•				
SUBJECT:					
	Name of c	orporation -	must include suffix		
Dear Sir or Madam:					
The enclosed "Applicat" (Certificate of Existence above referenced foreign	e," or "Certificate of	Good Stand	ling" and check are sub	t Business in Florida," mitted to register the	
Please return all corresp	pondence concerning	this matter	to the following:		
Meredith Maniatty					
		Name of P	erson		
c/o Hascoe Associates In	c				
		Firm/Comp	oany		
24 Field Point Road					
		Addres	SS		
Greenwich, CT 06830					2019 3 1
	C	ity/State an	d Zip code		
Meredith@hascoe.org		•			~
	E-mail address: (t	o be used fo	or future annual report r	otification)	
					2 :II : 3
For further information	concerning this matte	er, please ca	III:		7.7
Meredith Maniatty	at o	203	863-0631		-E-
Name of Perso		Area Code	Daytime Telep	ione Number	
Registration Se Division of Co Clifton Buildir 2661 Executive Tallahassee, Fl	rporations ng e Center Circle L 32301		MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection rporations	
Enclosed is a check for	the following amoun	I:			
□ \$70.00 Filing Fee	☐ \$78.75 Filing F Certificate of S		\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee Certificate of Sta 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.

			and the property data.
(If name unavaila	ble in Florida, enter alternate corporate	name adopted for the purpose of transacting busing	ess in Florida)
Delaware		3	
(State or country 03/30/2009	runder the law of which it is incorpora	,	
Upon Filing	of incorporation)	(Date of duration, if other than po	erpetusi)
<u></u>	(Date first transacted bus (SEE SECTIONS 607.1501 &	siness in Florida, if prior to registration) & 607.1502, F.S., to determine penalty liability)	
5252 Fisher Island	i Drive, Fisher Island, FL 33109		
		(Principal office address)	
Same as above			
	·	nt mailing address, if different)	(2) (2)
Name and stree	(Curren t address of Florida registered ager		7
	·		
Name:	t address of Florida registered ager		
Name:	t address of Florida registered ager Corporation Service Company 1201 Hays Street	nt: (P.O. Box <u>NOT</u> acceptable) 32301	
	t address of Florida registered ager Corporation Service Company 1201 Hays Street	nt: (P.O. Box <u>NOT</u> acceptable)	
Name: ffice Address: Registered age aving been names ignated in this arther wares to Comment of the comment o	t address of Florida registered ager Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance: ed as registered agent and to acceptance application, I hereby accept the appropriate the provisions of all stopping to the acceptance of the	nt: (P.O. Box <u>NOT</u> acceptable)	porution at the act in this capa

: : -

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	:	<u>. </u>
Address:		
,		
Vice Chai	irman:	
Address:		
		
Director:	Lloyd Hascoe	
Address:	5252 Fisher Island Drive, Fisher Island, FL 33109	
Director:	Abbe Hascoc	
	5252 Fisher Island Drive, Fisher Island, FL 33109	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
B. OFF	ICERS	~2
	Lloyd Hascoe	2019
	5252 Fisher Island Drive, Fisher Island, FL 33109	
Addicss.		12
Vina Drac	ident:	
	itent.	
Audiess.		.
•	Abbe Hascoe	
	5252 Fisher Island Drive, Fisher Island, FL 33109	
_	Lloyd Hascoc	
Treasurer	5252 Fisher Island Drive, Fisher Island, FL 33109	
Address:		or directors
	If necessary, you may attach an addendum to the application listing additional officers and/	of directors.
12	Signature of Director or Officer	
The office	cer or director signing this document (and who is listed in number 11 above) affirms that the and that he or she is aware that false information submitted in a document to the Department	facts stated herein of State constitutes
a third de	egree felony as provided for in s.817.155, F.S.	
13. Lloy	yd Hascoc, President	

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

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "HFC II, INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE EIGHTH DAY OF NOVEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HFC II, INC."

WAS INCORPORATED ON THE THIRTIETH DAY OF MARCH, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE
BEEN PAID TO DATE.



Authentication: 203970585

Date: 11-08-19