

F19000005359

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

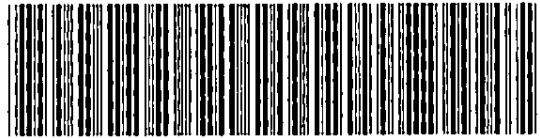
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

Office Use Only



800337609458

12/04/19--01003--007 **70.00

RECEIVED
2019 DEC -3 PM 4:36
TALLAHASSEE, FLORIDA

FILED
2019 DEC -3 PM 4:39
TALLAHASSEE, FLORIDA

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 12/3/2019

ENTITY NAME LONCO MARKETING, INC.

DOCUMENT NUMBER _____

****WALK IN****

FILED
2019 DEC -3 PM 4:39
TALLAHASSEE, FLORIDA

****PLEASE FILE THE ATTACHED AND RETURN****

XXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

Cert. Copy of Restated Arts & Amends if available. If not provide Cert. Copy of Arts & Amends.

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED 70.00

CHECK # 6967

Please call Tina at the above number for any issues or concerns. Thank you so much!

**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.*

LONCO MARKETING, 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)
New York

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. NOVEMBER 22, 2005 5. _____
(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. 9570 Labelle Ct., Delray Beach, FL 33446
(Principal office address)

(Current mailing address, if different)

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

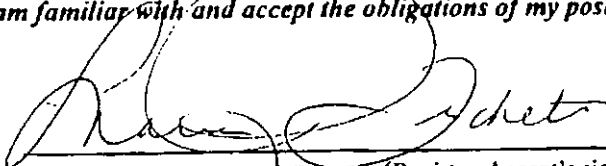
Name: United Corporate Services, Inc.

Office Address: 9200 South Dadeland Blvd., Ste. 508

Miami, Florida 33156
(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.



Maria R. Fischetti, Secretary

(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.

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

A. DIRECTORS

Chairman: Lon Mandel

Address: 9570 Labelle Ct., Delray Beach, FL 33446

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

FILED
2019 DEC -3 PM 4:39
SEC. OF STATE
TALLAHASSEE, FLORIDA

B. OFFICERS

President: Lon Mandel - CEO

Address: 9570 Labelle Ct., Delray Beach, FL 33446

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. _____



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 here 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. Lon Mandel - CEO

(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 LONCO MARKETING, INC. was filed on 11/22/2005, under the name of SPECIALISTS MARKETING SERVICES, INC., 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.

A Certificate of Amendment SPECIALISTS MARKETING SERVICES, INC., changing its name to LONCO MARKETING, INC., was filed 01/03/2019.



Witness my hand and the official seal
of the Department of State at the City
of Albany, this 02nd day of December
two thousand and nineteen.

Brendan C. Hughes

Brendan C. Hughes
Executive Deputy Secretary of State

FILED
2019 DEC -3 PM 4:39
CLERK OF THE
DEPARTMENT OF STATE
ALBANY, N.Y.