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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

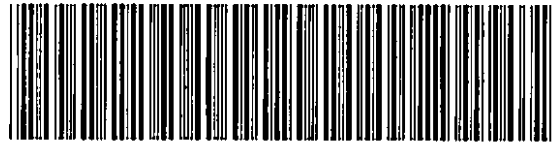
(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 JUN 21 PM 12:53

5/29/20

COVER LETTER

TO: Registration Section
Division of Corporations
C. PHILLIPS & ASSOCIATES, 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:
CORINE U. PHILLIPS

_____	Name of Person
C. PHILLIPS & ASSOCIATES, INC.	
_____	Firm/Company
13860 WELLINGTON TRACE, STE 38-248	
_____	Address
WELLINGTON, FL 33414	
_____	City/State and Zip code
corinep345@gmail.com	
_____	E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CORINE PHILLIPS	917	915-1250
_____	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

2023 JUN 21 PM 12:53

**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.*

C. PHILLIPS & ASSOCIATES, INC.

1. _____
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

C. PHILLIPS & ASSOCIATES CORP.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

NEW YORK STATE

82-25190670

2. _____ 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
7/28/2017

4. _____ 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)
13860 WELLINGTON TRACE, STE 38-248, WELLINGTON, FL 33414

7. _____
(Principal office address)
SAME

(Current mailing address, if different)

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

CORINE PHILLIPS

Name:

3307 POMEROI DRIVE #101

Office Address:

WELLINGTON

33414

_____, 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.

2020 JUN 21 PM 12:53

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

A. DIRECTORS

Chairman: CORINE PHILLIPS

Address: 3307 POMEROL DRIVE #101

WELLINGTON, FL 33414

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: CORINE PHILLIPS

Address: 3307 POMEROL DRIVE #101

WELLINGTON, FL 33414

Vice President: _____

Address: _____

Secretary: _____

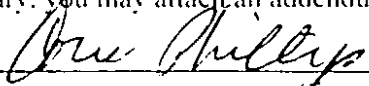
Address: _____

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 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.

13. CORINE PHILLIPS

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

2020 JUN 24 PM 12:53

State of New York
Department of State } ss:

I hereby certify, that the Certificate of Incorporation of C. PHILLIPS & ASSOCIATES, INC. was filed on 07/28/2017, 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.

The Biennial Statement is past due.



2020 JAN 21 PM 12:53

*WITNESS my hand and the official seal
of the Department of State at the City of
Albany, this 03rd day of January two
thousand and twenty.*

Brendan C. Hughes

Brendan C Hughes
Executive Deputy Secretary of State

**CERTIFICATE OF INCORPORATION
OF**

C. Phillips & Associates, Inc.

Under Section 402 of the Business Corporation Law

FIRST: The name of the corporation is:

C. Phillips & Associates, Inc.

(English Translation is: same)

SECOND: This corporation is formed to engage in any lawful act or activity for which a corporation may be organized under the Business Corporation Law, provided that it is not formed to engage in any act or activity requiring the consent or approval of any state official, department, board, agency or other body without such consent or approval first being obtained.

THIRD: The county, within this state, in which the office of the corporation is to be located is **KINGS**.

FOURTH: The total number and value of shares of common stock which the corporation shall have authority to issue is: **200 SHARES WITH NO PAR VALUE**.

FIFTH: The Secretary of State is designated as agent of the corporation upon whom process against it may be served. The address within or without this state to which the Secretary of State shall mail a copy of any process against the corporation served upon him or her is:

Corine Phillips
5415 Fillmore Ave
Brooklyn, NY 11234

I certify that I have read the above statements. I am authorized to sign this Certificate of Incorporation, that the above statements are true and correct to the best of my knowledge and belief and that my signature typed below constitutes my signature.

Corine U Phillips (signature)

Corine U Phillips, INCORPORATOR
5415 Fillmore Ave.
Brooklyn, NY 11234

JAN 21 PM 12:53

Filed by:

Corine Phillips

5415 Fillmore Ave

Brooklyn, NY 11234

2020 JAN 21 PM 12:53

FILED WITH THE NYS DEPARTMENT OF STATE ON: 07/28/2017
FILE NUMBER: 170728010017; DOS ID: 5177551



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 26, 2019

CORINE U PHILLIPS
13860 WELLINGTON TRACE
STE 38-248
WELLINGTON, FL 33414

SUBJECT: C. PHILLIPS & ASSOCIATES, INC.
Ref. Number: W19000102845

We have received your document for C. PHILLIPS & ASSOCIATES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Sharon D Franklin
Regulatory Specialist II

Letter Number: 019A00024169

RECEIVED

JAN 21 2020