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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

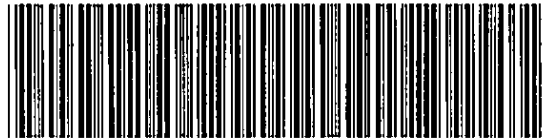
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/16/19--01019--004 **78.75

2020 FEB 10 AM 9:28

FEB 17 2020

M. SOLOMON

COVER LETTER

TO: Registration Section
Division of Corporations

Sylvain Analytics, 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:

Melissa Sylvain

Name of Person

Sylvain Analytics, Inc.

Firm/Company

21126 Birds Nest Terrace

Address

Boca Raton FL 33433

City/State and Zip code

msylvain@sylvainanalytics.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melissa Sylvain

at (703)

863-5749

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.*

1. Sylvain Analytics, Inc.
(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. Virginia 3. 20-1072247
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 04/20/2004 5. N/A
(Date of incorporation) (Date of duration, if other than perpetual)

6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 18 Blackjack Rd Ste 201, Fredericksburg, VA 22405
(Principal office address)

21126 Birds Nest Terrace Boca Raton FL 33433
(Current mailing address, if different)

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


Name: Melissa Sylvain

Office Address: 21126 Birds Nest Terrace

Boca Raton, Florida 33433
(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

Chairman: Ray Sylvain

Address: 21126 Birds Nest Terrace Boca Raton FL 33433

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Melissa Sylvain

Address: 21126 Birds Nest Terrace Boca Raton FL 33433

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. Melissa Sylvain, President/CEO

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

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Commonwealth of Virginia



State Corporation Commission

CERTIFICATE OF GOOD STANDING

I Certify the Following from the Records of the Commission:

That Sylvain Analytics, Inc. is duly incorporated under the law of the Commonwealth of Virginia;

That the corporation was incorporated on April 20, 2004;

That the corporation's period of duration is perpetual; and

That the corporation is in existence and in good standing in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

February 4, 2020

Joel H. Peck

Joel H. Peck, Clerk of the Commission



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 14, 2020

MELISSA SYLVAIN
SYLVAIN ANALYTICS, INC.
21126 BIRDS NEST TERRACE
BOCA RATON, FL 33433

SUBJECT: SYLVAIN ANALYTICS, INC.
Ref. Number: W20000002921

We have received your document for SYLVAIN ANALYTICS, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

The name and title of the person signing the document must be noted beneath or opposite the signature.

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Mei Solomon
Regulatory Specialist II Supervisor

Letter Number: 920A00000978

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FEB 10 2020

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