

FR000001559

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

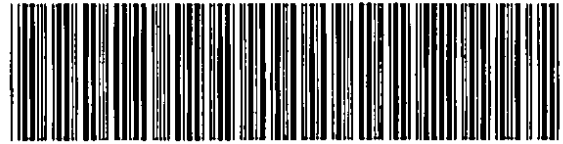
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T GLASS

MAR 23 2020



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 11, 2020

SANDOR SEIDMAN
13048 FLAMINGO TERRACE
PALM BEACH GARDENS, FL 33410 US

SUBJECT: INDULGENCE (RMI), LTD.
Ref. Number: W20000026189

We have received your document for INDULGENCE (RMI), LTD. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The use of LIMITED or LTD. is not sufficient as a corporate designation. The name must include a word such as INCORPORATED, INC., CORPORATION or CORP.

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

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) 245-6052.

Tacarri K Glass
Regulatory Specialist II

Letter Number: 420A00005380

RECEIVED
MAR 20 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Indulgence (RMI), Ltd.

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:

Sandor Seidman

Name of Person

Indulgence (RMI), Ltd.

Firm/Company

13048 Flamingo Terrace

Address

Palm Beach Gardens, FL 33410

City/State and Zip code

Sandorseidman@gmail.com

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

For further information concerning this matter, please call:

Sandor Seidman

at (860) 2277747

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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. Indulgence (RMI), LTD CORP. ALI
(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. Marshall Islands 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. JAN. 9, 2020 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. None
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 13048 FLAMINGO TERRACE, PALM BEACH GARDENS, FL 33410
(Principal office street address)

(Current mailing address, if different)

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

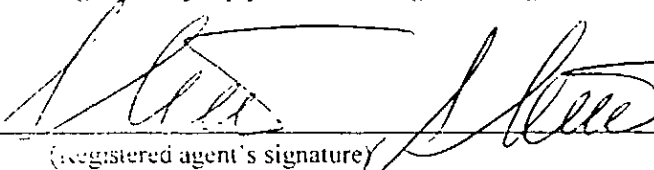
Name: Sandor Seidman

Office Address: 13048 Flamingo Terrace

Palm Beach Gardens, Florida 33410
(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.

 3/16/20
(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 in which the corporation is incorporated.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☒ President Sandor Seidman

☐ Vice President _____

☒ Secretary ☒ Treasurer

☐ Other John Senning ☐ Other Sandor Seidman

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: _____

☐ Vice Chairman Address: _____

☐ Director _____

☐ President _____

☐ Vice President _____

☐ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: SANDOR SEIDMAN

☐ Vice Chairman Address: 13048 FLAMINGO TERRACE

☐ Director PALM BEACH GARDENS, FL 33410

☒ President

☐ Vice President

☐ Secretary ☒ Treasurer

☐ Other _____ ☐ Other _____

☐ Chairman Name: JOHN SENNING

☐ Vice Chairman Address: 6400 LAKE ROAD

☐ Director 9 NOKOTA LANE

☐ President E4600 CT 06426

☐ Vice President

☒ Secretary ☐ Treasurer

☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. _____ Signature of Director or Officer 3/16/20

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. SANDOR SEIDMAN, PRESIDENT
(Typed or printed name and capacity of person signing application)

REPUBLIC OF THE MARSHALL ISLANDS

OFFICE OF THE REGISTRAR OF CORPORATIONS

ENDORSEMENT CERTIFICATE

IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5 OF THE
BUSINESS CORPORATIONS ACT OF THE REPUBLIC OF THE MARSHALL ISLANDS

1990

I CERTIFY that I have endorsed "FILED" upon the Original Articles of Incorporation of

INDULGENCE (RMI), LTD.

Reg. No. 103723

as of

January 9, 2020

being the date upon which existence of said corporation commenced.

I FURTHER CERTIFY that a Duplicate of said Articles of Incorporation
has been filed with this office.

2021. 20 11 3:46

Given under my hand and seal on this

January 9, 2020.

Cisilia Jean

Cisilia Jean

Deputy Registrar of Corporations

