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(Re	questor's Name)				
(Ad	dress)					
(Ad	dress)					
(Cit	y/State/Zip/Phor	ne #)				
PICK-UP	MAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificate	es of Status				
Special Instructions to Filing Officer:						
C LXXXXY	27710					

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03/23/20--01027--001 **70.00

04/21/20--01002--007 **150.00

2028 APR 20 PH 1: 34

APR 21 2020 M. SOLOMON

COVER LETTER

то:	O: Registration Section Division of Corporations					
C17 1 TD 1	ABEL REAL	TY CORP				
SUB,	JECT:	Name of co	rporation -	must include suffix		
Dear (Sir or Madam;					
"Certi	ficate of Existence,		lood Stand	ing" and check are sub	et Business in Florida," omitted to register the	
	e return all correspo ONY DALESSANDRO	ndence concerning th	nis matter t	o the following:		
		1	Name of Po	erson		
8207 R	IDGE RD	F	irm/Comp	any		
BROO	KEYN, NY 11209		Addres	s		
JDALI	ESSANDRO60@GMAL		y/State and	ł Zip code		
		E-mail address: (to	be used fo	r future annual report	notification)	
For fu	orther information co	oncerning this matter	, please ca	H:		
ANGELA DOMANSKI			18	720-9255	20-9255	
	Name of Person		Area Code	Daytime Telep	Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				Registration S Division of C P.O. Box 632	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclo	sed is a check for th	e following amount:				
= \$7	0.00 Filing Fee	S78.75 Filing Fee Certificate of Sta		\$78.75 Filing Fee & Certified Copy	S87.50 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. ABEL REALTY CORP. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") ABEL REALTY CORP SOUTH (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) NEW YORK (State or country under the law of which it is incorporated) (FEI number, if applicable) 2. 5. (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 8207 RIDGE ROAD, BROOKLYN, NY 11209 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) PAUL DEFILIPPIS

21954 TIDEWATER TERRACE F 207

BOCA RATON . Florida 33433
(City) (Zip code) Name: Office Address:

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.

(Revistered 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 ANTHONY DALESSANDRO Chairman: 8207 RIDGE ROAD Address: BROOKLYN, NY 11209 Vice Chairman: Address: ____ Director: __ Address: ___ **B. OFFICERS** ANTHONY DALESSANDRO President: 8207 RIDGE ROAD Address: BROOKLY, N. NY 11209 ANTHONY DALESSANDRO Vice President: __ 8207 RIDGE ROAD Address: BROOKLYN, NY 11209 ANTHONY DALESSANDRO Secretary: 8207 RIDGE RD, BROOKLYN, NY 11209 Address: ANTHONY DALESSANDRO Treasurer: 8207 RIDGE RD, BROOKLYN, NY 11209 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.

ANTHONY DALESSANDRO, PRESIDENT

13.

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of ABEL REALTY CORP. was filed on 10/29/2018, 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.

I further certify that no other documents have been filed by such corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 06th day of March two thousand and twenty.

Brendan C. Hughes

Executive Deputy Secretary of State

Braden C Hylan

20200003030520 + 92



March 26, 2020

ANTHONY DALESSANDRO 8207 RIDGE RD BROOKLYN, NY 11209 US

SUBJECT: ABEL REALTY CORP Ref. Number: W20000032710

We have received your document for ABEL REALTY CORP and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$150.00.

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: 420A00006682

RECEIVED

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