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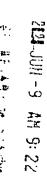
(F	Requestor's Name)	
(F	Address)	
(A	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
(0	Occument Number)	
Certified Copies	Certificates of	Status
Special Instructions t	o Filing Officer:	

Office Use Only



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JUN 10 2020 M. SOLOMON

COVER LETTER

TO:	Registration Section				
	Division of Corporations	EY HSIN, DDS,	DC.		
SUBJ	JECT:	ET HSIN, DDS,	PC		
0000		ne of corporatio	n - must	include suffix	
15	Status Martinas				
Dear S	Sir or Madam:				
"Certi	nclosed "Application by Foreign ficate of Existence," or "Certific referenced foreign corporation to	ate of Good Sta	nding`` a	nd check are sul	
Please	return all correspondence conce	ming this matte RICHARD SIEF			
	FLORIDA	Name of SMALL BUSIN		GAL CENTER	
		E. 162			
		Firm/Cor 6810 N. S			
		Addı COCONUT Ç		L 33073	
		C: 10	1 52		
		City/State a Info@busine			
	E-mail addr	ess: (to be used	for futu	e annual report	notification)
For fu	rther information concerning this	s matter, please	call:		
Richa	rd Sierra	954	757	-1919	
	Name of Person	at () le	Daytime Telep	phone Number
	STREET/COURIER ADDRI Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	ESS:		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7
Enclos	sed is a check for the following a	mount:			
3 \$70	0.00 Filing Fee	ling Fee & Definition of Status		5 Filing Fee & ied 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.

AUDREY HSIN DDS. P.C.

"Inc.,"	name of corporation; must include "INCORPORA" "Co.," "Corp.," "Inc," "Co," or "Corp.")	FED," "COMPANY," "CORPORATION,"	
	AUDREY HSIN, D	DS, INC.	
NEW	YORK	name adopted for the purpose of transacting business in Florida)	
(State	ember 23, 2016	d) (FEI number, if applicable)	
4		5(Date of duration, if other than perpetual)	
NON		(Date of duration, if other than perpetual)	
6.	L		
	(Date first transacted busin	ness in Florida, if prior to registration)	
		507.1502, F.S., to determine penalty liability)	
7	1348 Timberlane R	d, Tallahassee, FL 32312	
/		rincipal office address)	
	1.1	incipal office accides)	
		•	
		en ser	29. 29. 29. 20.
	(Current	mailing address, if different)	22 ess 25 ess 25 ess 26 ess 27 ess 27 ess 28
	(Current :	mailing address, if different)	
8. Name		mailing address, if different)	
8. Name	(Current is and street address of Florida registered agent: Richard Sierra, Esq.	mailing address, if different)	6- MNF
	c and street address of Florida registered agent:	mailing address, if different) (P.O. Box NOT acceptable)	JUH -9 AX
	and street address of Florida registered agent: Richard Sierra, Esq. Name: Florida Small Business Legal Cent 6810 N. SR 7	mailing address, if different) (P.O. Box NOT acceptable)	JUH -9 AM
	c and <u>street address</u> of Florida registered agent: Richard Sierra, Esq. Name: Florida Small Business Legal Centers 6810 N. SR 7	mailing address, if different) (P.O. Box NOT acceptable) er	JUN -9 AN 9:2
	c and street address of Florida registered agent: Richard Sierra, Esq. Name: Florida Small Business Legal Cent 6810 N. SR 7 ddress: Coconut Creek	mailing address, if different) (P.O. Box NOT acceptable) er 33073	JUN -9 AN 9:
	c and street address of Florida registered agent: Richard Sierra, Esq. Name: Florida Small Business Legal Cent 6810 N. SR 7 ddress: Coconut Creek	mailing address, if different) (P.O. Box NOT acceptable) er	JUN -9 AN 9:2

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.

Chand Serva
(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: _ ____ Vice Chairman: _____ Address: _____ ______ Audrey Hsin, DDS Director: 1348 Timberlane Rd, Tallahassee, FL 32312 Address: ___ **B. OFFICERS** Audrey Hsin, DDS President: 1348 Timberlane Rd, Tallahassee, FL 32312 Address: _ Vice President: Audrey Hsin, DDS Secretary: 1348 Timberlane Rd, Tallahassee, FL 32312 Address: Audrey Hsin, DDS Treasurer: _ 1348 Timberlane Rd, Tallahassee, Ft 32312 Address: _____ NOTE: If necessary, you may attach an addar m to the application listing additional officers and/or directors. The officer or director signing this document (and w to is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that fall tion submitted in a document to the Department of State constitutes a third degree felony as provided for in 2.817.155, F Audrey Hsin, Des - President 13. _____ (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 AUDREY HSIN DDS, P.C. was filed on 09/23/2016, 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.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 02nd day of June two thousand and twenty.

Braden C Hylan

Brendan C Hughes
Executive Deputy Secretary of State