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	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions 6/22 Pecer Work.	to Filing Officer: ved Covrected Paper- ux
	Pin

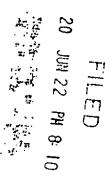
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: PELHAM SERVICES CORP		
	corporation -	must include suffix
Dear Sir or Madam:		
The enclosed "Application by Foreign Cor" "Certificate of Existence," or "Certificate of above referenced foreign corporation to tra	of Good Standi	
Please return all correspondence concernin	g this matter to	the following:
CHARLES S SERFATY		
	Name of Pe	rson
SERFATY LAW PA		
	Firm/Compa	uny
4770 BISCAYNE BOULEVARD SUITE 1430)	
	Address	3
MIAMI, FL 33137		
	City/State and	Zip code
CSERFATY@SERFATYLAW.COM		. 2
E-mail address:	(to be used for	future annual report notification)
For further information concerning this ma	tter, please cal	
SIOLY RODRIGUEZ	305 at (,722.9999 · . 宝 □
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 Enclosed is a check for the following amou		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Please make check payable to: FLORIDA DEI \$70.00 Filing Fee	PARTMENT OF Fee & \square :	DF STATE \$78.75 Filing Fee &

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.

l.	VICES CA CORP orporation; must include "INCORPORATED," "	COMPANY," "CORPORATIO	N."
"Inc.," "Co.," "C	orp," "Inc," "Co," or "Corp.")		
(If name upavail	able in Florida, enter alternate corporate name ado	ated for the aurage of transacti	na husinoss in Florida)
CALIFORNIA		26 115 1540	-
(State or country under the law of which it is incorporated)		26-445-1540	
(Date of incorporation) 5		(Date of duration, if other than perpetual)	
	(Date first transacted business in Fl (SEE SECTIONS 607.1501 & 607.1502)	orida, if prior to registration) . F.S., to determine nenalty liabil	lity)
1430 BISCAYNE	E BOULEVARD SUITE 1430 MIAMI, FL 33137		· · · · · · · · · · · · · · · · · · ·
	(Principal office	street address)	
	(Current mailing a	ddress, if different)	
			20
Name and stree	et address of Florida registered agent: (P.O. B	Box NOT acceptable)	
Name:	SERFATY LAW PA		FILE Jun 22
ffice Address:	4770 BISCAYNE BOULEVARD SUITE 1430	1	2 PF CD
	MIAMI	Florida	
	(City)	(Zip code)	
aving been names esignated in this erther agree to c	ent's acceptance: ned as registered agent and to accept service of application, I hereby accept the appointmen omply with the provisions of all statutes rela- with and accept the obligations of my positions	it as registered agent and agr tive to the proper and comple	ree to act in this capacity
_	(Registered agent's signa	Q A	
0. Attached is a	certificate of existence duly authenticated, no	t more than 90 days prior to d	lelivery of this application

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

A. DIRECTORS GABRIEL REVERON Name: □ Chairman □Chairman Name: 4770 Biscayne Blvd. Suite 1430, □ Vice Chairman Address: Miami, Fl 33137 □Vice Chairman Address: □ Director □Director **₽**President □President □ Vice President □Vice President Secretary □Treasurer ■Treasurer □ Secretary □Other _____ □Other _____ ☐Other _____ □Other ____ ☐ Chairman □Chairman Name: Name: □ Vice Chairman Address: ☐ Vice Chairman Address: □Director □ Director □President □President ☐ Vice President □ Vice President □ Treasurer ☐ Treasurer □ Secretary □ Secretary □Other _____ □ Other ☐Other _____ □ Chairman □ Chairman Name: Name: □Vice Chairman Address: _- _____ □Vice Chairman Address: _ □Director □Director □President **CIPresident** ☐ Vice President □ Vice President □ Secretary □ Treasurer □ Secretary ☐ Treasurer □Other _____ □Other _____ □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. 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

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 of 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.

GABRIEL REVERON, President, S,T

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

PELHAM SERVICES CA CORP

FILE NUMBER:

C3140633

FORMATION DATE:

03/05/2009

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of May 21, 2020.

ALEX PADILLA Secretary of State



June 11, 2020

CHARLES S SERFATY SERFATY LAW PA 4770 BISCAYNE BOULEVARD SUITE 1430 MIAMI, FL 33137 US

SUBJECT: PELHAM SERVICES CA CORP

Ref. Number: W20000058608

We have received your document for PELHAM SERVICES CA CORP and check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

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

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Laura D Chang Regulatory Specialist II

6/22 Received corrected paperwork

Letter Number: 920A00011528