

F20000004320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

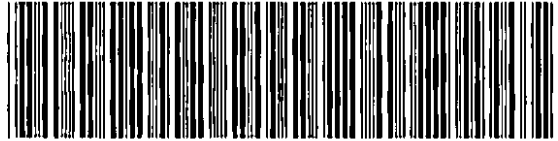
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2020 OCT -5 AM 9:25

FILED

2020 OCT -5 PM 1:08

OCT 07 2020

10:10:10

**CT CORP****3458 Lakeshore Drive, Tallahassee, FL 32312****850-656-4724****Date:** 10/5/2020

Acc#120160000072

*en: c SW*

|             |                     |
|-------------|---------------------|
| Name:       | CPTKD ACADEMY, INC. |
| Document #: |                     |
| Order #:    | 13246740            |

|                                   |                          |  |                         |  |
|-----------------------------------|--------------------------|--|-------------------------|--|
| Certified Copy of Arts & Amend:   | <input type="checkbox"/> |  |                         |  |
| Plain Copy:                       | <input type="checkbox"/> |  |                         |  |
| Certificate of Good Standing:     | <input type="checkbox"/> |  |                         |  |
|                                   | <input type="checkbox"/> |  |                         |  |
| Apostille/Notarial Certification: | <input type="checkbox"/> |  | Country of Destination: |  |
|                                   |                          |  | Number of Certs:        |  |

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| Filing: <input checked="" type="checkbox"/> | Certified: <input checked="" type="checkbox"/> |
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| Availability _____  |
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| W.P. Verifier _____ |
| Ref# _____          |

|            |       |
|------------|-------|
| Amount: \$ | 87.50 |
|------------|-------|

Thank you!

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CPTKD Academy, Inc.  
\_\_\_\_\_  
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Victor Seitles

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

210 West 77th Street

\_\_\_\_\_  
Address

New York, NY 10024

\_\_\_\_\_  
City/State and Zip Code

victor@quoguecapital.com

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

For further information concerning this matter, please call:

Chelsea Rubin

\_\_\_\_\_  
Name of Person

at (202) 739-5284  
\_\_\_\_\_  
Area Code Daytime Telephone Number

**Mailing Address:**

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

**Street 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 amount:

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

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certified Copy | <input checked="" type="checkbox"/> \$87.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|---|--|---|--|

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO  
CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN  
THE STATE OF FLORIDA:*

1. CPTKD Academy, Inc.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 85-2436155  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 08/03/2020 5. perpetual  
(Date of Incorporation) (Date of duration, if other than perpetual)

6. 11/1/2020 11  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 210 West 77th Street New York, NY 10024  
(Principal office street address)

(Current mailing address, if different)

8. Educational purposes within the meaning of section 501(c)(3) of the Internal Revenue Code.  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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

Name: CT Corporation System

Office Address: 1200 South Pine Island Road #250

Plantation, Florida 33324  
(City) (Zip Code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**10. 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.*



Donna Peterson-Riggs, Assistant Secretary

(Registered agent's signature)

11. 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.

12. 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: Teresa Throckmorton  
☐ Vice Chairman Address: 210 West 77th Street  
☒ Director New York, NY 10024  
☒ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Todd Wider  
☐ Vice Chairman Address: 210 West 77th Street  
☒ Director New York, NY 10024  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Wayne Rothbaum  
☐ Vice Chairman Address: 210 West 77th Street  
☒ Director New York, NY 10024  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☒ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: Victor Seitles  
☐ Vice Chairman Address: 210 West 77th Street  
☐ Director New York, NY 10024  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☒ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer  
☐ Other: \_\_\_\_\_ ☐ Other: \_\_\_\_\_

**NOTE: 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.

13. *Victor Seitles*  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Victor Seitles, Treasurer  
(Typed or printed name and capacity of person signing application)

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF  
DELAWARE, DO HEREBY CERTIFY "CPTKD ACADEMY, INC." IS DULY  
INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD  
STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS  
OF THIS OFFICE SHOW, AS OF THE SECOND DAY OF OCTOBER, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION  
IS AN EXEMPT CORPORATION.



Jeffrey W. Bullock, Secretary of State

3369032 8300C

SR# 20207623362

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 203786190

Date: 10-02-20