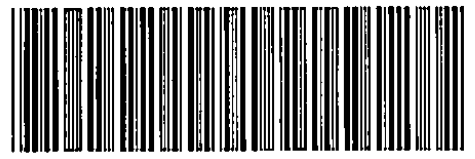


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3003586740

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

01/31/01--01097--001

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

Special Instructions to Filing Officer:  
  
00647  
01114  
W21000009985

Office Use Only

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Tony's Tile & Flooring Inc.

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:

Dan Gianuzzi

Name of Person

Tax Express, LLC

Firm/Company

826 3rd Street S.

Address

Nampa, Idaho 83651

City/State and Zip code

dang@taxexpressidaho.com

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

For further information concerning this matter, please call:

Dan Gianuzzi

at ( 208 )

546-0491

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:  
Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRAN  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Tony's Tile & Flooring, Inc.  
\_\_\_\_\_  
(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 Flo

2. Idaho \_\_\_\_\_ 3. 81-2365097  
\_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. April 23, 2018 \_\_\_\_\_ 5. \_\_\_\_\_  
\_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
\_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1601 Chapman Street Coco, Florida 32922  
\_\_\_\_\_  
(Principal office street address)  
826 3rd Street S. Nampa ID 83651  
\_\_\_\_\_  
(Current mailing address, if different)

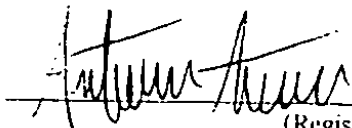
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Antonio Amaro  
\_\_\_\_\_

Office Address: 1601 Chapman Street  
\_\_\_\_\_  
Coco \_\_\_\_\_, Florida 32922  
(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  
designated in this application, I hereby accept the appointment as registered agent and agree to act in this c  
further agree to comply with the provisions of all statutes relative to the proper and complete performance o  
and I am familiar with and accept the obligations of my position as registered agent.*

  
\_\_\_\_\_  
(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this app  
the Department of State, by the Secretary of State or other official having custody of corporate records in the ju  
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**

Chairman Name: Antonio Amaro  
 Vice Chairman Address: 1620 Chapman St  
 Director Coco, Florida 32922  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: Angelica Belcastro  
 Vice Chairman Address: 1620 Chapman St  
 Director Coco, Florida 32922  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other \_\_\_\_\_  Other \_\_\_\_\_

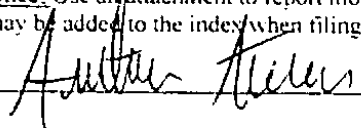
Chairman Name: \_\_\_\_\_  
 Vice Chairman Address: \_\_\_\_\_  
 Director \_\_\_\_\_  
 President \_\_\_\_\_  
 Vice President \_\_\_\_\_  
 Secretary  Treasurer  
 Other \_\_\_\_\_  Other \_\_\_\_\_

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

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

Chairman Name: \_\_\_\_\_  
 Vice Chairman Address: \_\_\_\_\_  
 Director \_\_\_\_\_  
 President \_\_\_\_\_  
 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. Individuals may be added to the index when filing your Florida Department of State Annual Report form

11.   
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 he is aware that false information submitted in a document to the Department of State constitutes a third degree felony as per § 817.155, F.S.

12. Dan Gianuzzi, Tax Accountant  
(Typed or printed name and capacity of person signing application)



# STATE OF ID

Lawrence Denney | Secretary  
Business  
450 North  
PO Box  
Boise

February 8, 2021

**Request Type: Certificate of Existence/Filing**

Request #: 0004168470

Receipt #: 000444161

Issuance Date: 02/08/2021

Copies Requested: 0

**Regarding: TONY'S TILE & FLOORING INC**

Filing Type: General Business Corporation (D)

Formation/Qualification Date: 04/23/2018

Status: Active-Good Standing

Duration Term: Perpetual

File #: 635080

Formation Locale: IDAHO

Inactive Date:

## Certificate of Existence

I, Lawrence Denney, Secretary of State of the State of Idaho, do hereby certify that effective as of the issuance date noted above

### TONY'S TILE & FLOORING INC

is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above.

A handwritten signature in black ink, appearing to read "Lawrence Denney".

Lawrence Denney

Idaho Secretary of State

Processed By: Business Division

Verification #



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 31, 2021

DAN GIANUZZUI  
826 3RD ST S  
NAMPA, ID 83651 US

SUBJECT: TONY;S TITLE & FLOORING INC.  
Ref. Number: W21000009985

We have received your document for TONY;S TITLE & FLOORING INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company. *This entity is a corp*

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) 245-6051.

Sharon D Franklin  
Regulatory Specialist II

Letter Number: 621A00002183

**RECEIVED**  
FEB 12 2021