Falmoua308

(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:				
W21000 051359 05341				
W7 100036337 W				

Office Use Only



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08/02/21--01031--005 **78.75

21/8/2X

COVER LETTER

TO: Registration Section Division of Corporation	ons			
SUBJECT: WINNERS INC				
	Name of corporation	ı - must include suffix		
Dear Sir or Madam:				
The enclosed "Application by "Certificate of Existence," or above referenced foreign corporate to the comparison of the	Certificate of Good Sta	nding" and check are subt	t Business in Florida." nitted to register the	
Please return all corresponden	ce concerning this matte	r to the following:		
Thomas Terwilliger	N	20		
	Name of	Person		
WINNERS INC.				
	Firm/Co	npany		
3160 NW 1 Avenue				
	Add	ress	**	
Pompano Beach, Florida 33064				
	City/State	and Zip code		
HQ@Winnersinc.us				
E-r	nail address: (to be used	for future annual report r	notification)	
For further information conce	rning this matter, please	call:		
Thomas Terwilliger	at (<u>954</u>) 908-3366		
Name of Person	Area Co	de Daytime Telep	hone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		Registration S Division of Co P.O. Box 632	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
	Howing amount: LORIDA DEPARTMEN \$78.75 Filing Fee & Certificate of Status	T OF STATE \$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.

L. WINNERS INC.				
(Enter name of co	rporation; must include "INCO	ORPORATED." "	COMPANY," "CORPORATION,"	
"Inc.," "Co., ' "Co	rp." "Inc." "Co." or "Corp.")			A.
	_ r	NIV T)	TO TO
とごととの	thes of	10 4, 上,	0	
(If name unavaila	ble in Florida, enter afternate (corporate name ado	pted for the purpose of transacting bus	iness in Florida)
2. Nevada		3 20	5-0764832	
(State or country	under the law of which it is i	incorporated)	(FEI number, if applical	ole)
4. August 10, 2007 (Date	of incorporation)		(Date of duration, if other than perpetual)	
6. <u>n/a</u>	(Date first trans	acted business in F	orida, if prior to registration)	·
	(SEE SECTIONS 60)	7.1501 & 607.1502	, F.S., to determine penalty liability)	
7 2140 NW 1 Aven	ue. Pompano Beach, Florida,	33064		
7. 3100 SW 1 AVen	ue. Fompano Beach, Florida,	(Principal office	street address)	
-	-			
		(Current mailing)	(ddress, if different)	
		<u>.</u>		
8 Name and street	t address of Florida register	red agent: (P.O.)	Box NOT acceptable)	
b. Name and <u>stree</u>	t address of t kinda register			F= 1
Name:	Thomas Terwilliger			
Office Address:	3160 NW 1 Avenue			
Ciffee Madress.	<u> </u>			N
	Pompano Beach		, Florida <u>33064</u> (Zip code)	•
	(City)		(Zip code)	•
9. Registered ago	ent's acceptance:			- 1
Havina keen nan	ed as registered agent and	to accept service	of process for the above stated cor	poration at the place
davianatad in this	application. I hereby acce	est the appointme	ns as registered agent and agree to	act in this capacity. I
further agree to c	omply with the provisions of with and accept the obliga-	of all statutes rew ations of my posit	ttive to the proper and complete pe ion as registered agent.	ijinmance oj my aanes
ana i am jamawi	wan and accept the obogs	mana, ny my pomo		
• =				
	1 - 3 - 1 - 12 - 12	054-7		
-	fReg	istered agent's sign	ature)	•

under the law of which it is incorporated.

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

A. DIRECTORS				
□Chairman	Name:	□Chairman	Name: Frank Magliochetti	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director	Pompano Beach, Florida 33064	Director	Delray Beach, Florida 33445	
■President		□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	□Secretary	□Treasurer	
□Other	Other	□Other	Other	
□Chairman	Name:	□Chairman	Michael Handelman	
□Vice Chairman	Address: 301 E. Ocean Ave, Ste 2	□Vice Chairman	Address: 3210 Rickey Court	
Director	Lantana, Florida 33462	Director	Thousand Oaks, CA., 91362	
□President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer	
□Other	□Other	□Other		
□Chairman	Andrew Paul	□Chairman	Wayne Allen Root	
□Vice Chairman	12046 Festivo Avenue	□Vice Chairman	Address:	
Director	Las Vegas, Nevada 89138	■Director	Unit 3-376	
□President		□President	Las Vegas, Nevada 89134	
□Vice President		□Vice President		
□ Secretary	□Treasurer	□ Secretary	□Treasurer	
Other	Other	□Other	Other	
Important Notice: individuals may b	Use an attachment to report more than six (6). The e added to the index when filing your Blorida Depar	riment of State Annual Re	d for reporting purposes only. Non-indexed eport form,	
12.	Signature of Direct	or or Ollicer		
The officer or dire she is aware that f	ector signing this document (and who is listed in null lalse information submitted in a document to the De	mber 11 above) aftirms th	nat the facts stated herein are true and that he outes a third degree felony as provided for in	

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify, that the following is a list of all organizational documents on file in this office for

Winners, Inc.

Organizational Documents on File

Filing Date

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, Winners, Inc., as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 08/10/2007, and is in good standing in this state.



Certificate Number: B202103281543204 You may verify this certificate

online at http://www.nvsos.gov

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 03/28/2021

Borhara K. Cegarste

BARBARA K. CEGAVSKE Secretary of State



April 15, 2021

THOMAS TERWILLIGER 3160 NW 1 AVENUE POMPANO BCH, FL 33064 US

SUBJECT: WINNERS INC Ref. Number: W21000051359

We have received your document for WINNERS INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The alternate name selected for your corporation is not available in Florida. Please select a new alternate name that contains "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." You may make the corrections to the alternate name in the space provided in number one of the application.

The document number of the name conflict is L17000175242.

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

RECEIVED AND

Letter Number: 821A00007835