

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

Corporation Name & Document Number, (if I	(OFFICE USE ONLY) known):
1. R. S. Buckman Enterprises, Inc.	Document #
(Business Name)	Document #
Walk in	Pick up time
Mail out	Will wait
Photocopy	AMMENDMENTS 27
Certified Copy (please stamp each page)	The state of the s
Certificate of Status	Company of the compan
NEW FILINGS	AMMENDMENTS 2
Profit	Amendment
Not for Profit	Resignation of R.A. Officer/Director Change of Registered Agent
Limited Liability Domestication	Dissolution/Withdrawal
Other	Merger
	Conversion
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	_XForeign filing
101 - 2-2 - XI	Limited Partnership
Fictitious Name	Reinstatement Trademark
APOSTIL ()	Other
Country	

EXAMINER'S INITIALS:

COVER LETTER

TO:	_	on Section of Corporations						
SUBJ	FCT.	R.S. Buckman	Enterprises, Inc.					
SUDO	ECT:		Name of corporati	on - mus	t include suffix			_
Dear S	ir or Mada	m:						
"Certif	ficate of Ex	istence," or "Cer	eign Corporation fo tificate of Good St ion to transact busi	anding"	and check are sub-	et Business in Fl mitted to registe	orida," r the	
Please	return all c	orrespondence e	oncerning this mate	er to the	following:			
			Richard	S Buckma	an			
			Name	of Person	1			
			R.S. Buckman F	interprise	es, Inc.		~	
			Firm/Co	mpany		5.1	221	 4.63:51
			2517 NE	37th Dr			NUL -	\$ 48 48 48 48 48 48
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			Fort Lauderdale	:, FL 333	08-6344	යා ර දා ර ආර	₽ ₽) 9 (195
			City/State	and Zip	code		4 : 2	— (: <u>°</u>
			Scan@Rsbu	ckman.c	om		27	
		E-mail	address: (to be use	d for futi	ire annual report n	otification)		_
For fu	rther inforn	nation concerning	g this matter, please	e call:				
Richard	d S Buckma	n	at (954)	616-7215			
	Name of	Person	Area Co	ode	Daytime Telepl	hone Number		
	Registrati Division The Cent 2415 N. I	C/COURIER AD ion Section of Corporations re of Tallahassee Monroe Street, S ee, FL 32303			MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7		
Please	sed is a chec make check 0.00 Filing	Гее 🔲 \$78.	ing amount: IIDA DEPARTME! 75 Filing Fee & ificate of Status	△ \$78.	FATE 75 Filing Fee & ified Copy	S87.50 Fil Certificate Certified	e of Stati	

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.

purpose of transacting t	business in Florida)	
23-3096552		
(FEI number, if applicable)		
(Date of duration, if other than perpetual)		
or to registration) ermine penalty liability))	
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. 33308-6344	27 FE	
33308-6344 (Zip code)		
for the above stated c	corporation at the	
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	performance of m	
proper and complete partered agent.		
	for the above stated or cred agent and agree proper and complete	

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.

the primary officers and/or directors (up to six (6) total):

A. DIRECTORS Richard S. Buckman Name: _____ ☐ Chairman □ Chairman 2517 NE 37th Street Address: Ft. Lauderdale FL 33308 ☐ Vice Chairman □Vice Chairman Address: □ Director Director President President ☐ Vice President □Vice President **Secretary** Treasurer **☑**Treasurer ☐ Secretary □ Other _____ ☐Other _____ □Other _____ Name: ______ □ Chairman Name: □ Chairman ☐ Vice Chairman Address: □ Vice Chairman Address: _____ □ Director □ Director □ President ☐ President ☐ Vice President ☐ Vice President _ ☐ Secretary ☐ Treasurer ☐ Secretary ☐ Treasurer Other ___ □Other ____ ☐ Other _____ Chairman Name: ☐ Chairman □ Vice Chairman Address: _ □Vice Chairman Address: ______ □ Director ☐ Director ☐ President ☐ President ☐ Vice President ☐ Vice President □ Secretary □ Treasurer ☐ Treasurer □Secretary 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 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.

Richard S. Buckman, President

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

05/03/2021

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

R. S. BUCKMAN ENTERPRISES, INC.

is duly registered as a Pennsylvania Business Corporation under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

IN TESTIMONY WHEREOF, I have hereunto sermy hand and caused the Seal of the Secretary's

Office to be affixed, the day and year above written.

Acting Secretary of the Commonwealth

Certification Number: TSC210503121168-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify