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AUG 13 2021 M. SOLOMON

### **COVER LETTER**

	tration Section ion of Corporat	ions			
SUBJECT:	BASSETT COA				
SUBJECT		Name of corpora	lion - mi	ist include suffix	
Dear Sir or M	adam:				
"Certificate o	f Existence." or	y Foreign Corporation "Certificate of Good Sporation to transact but	Standing	" and check are subt	
Please return ABDELBASE	•	nce concerning this ma	itter to th	ne following:	
		Name	of Perso	on	
171 11 10 10 10 10 17	S1: 1 . 1.11:	Firm/C	Company	<i>;</i>	
161 ALDRIDO	iE LANI:		11		
DAVENPORT	FI 33897	A	ddress		
		City/Sta	te and Z	in code	
info@bassettli	mousine.com	2.1,7.7.1		.,	
	E	-mail address; (to be us	ed for fi	iture annual report n	otification)
For further in	formation cone	erning this matter, plea	se call:		
ABDELBAST	CHERIET	917 at (	, 6	13-2248	
Nam	e of Person	Area (	Code	Daytime Telepl	ione Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING Al Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7		
	neck payable to:	ollowing amount: FLORIDA DEPARTM! \$78.75 Filing Fee & Certificate of Status	□ \$7	STATE 8.75 Filing Fee & ortified 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.

	CH CORP.				
	orporation; must include "INCORPORATI orp." "Inc." "Co," or "Corp.")	ED," "CC	ompany," "Corporation,"		
(If name unavail	able in Florida, enter alternate corporate na	me adopto	ed for the purpose of transacting b	usiness in Florida)	
NEW YORK		3.			
(State or countr	y under the law of which it is incorporated		(FEI number, if applie	rables	
01/13/2015	(Date of incorporation)		5. 47-2828302 (Date of duration, if other than perpetual)		
(Date					
08/05/2021					
	(SEE SECTIONS 607.1501 & 60	7.1502, F	S., to determine penalty liability)		
	LANE DAVENPORT FL 33897		S., to determine penalty liability)  eet address)		
	LANE DAVENPORT FL 33897  (Principal LANE DAVENPORT FL 33897	office <u>str</u>		282	
161 ALDRIDGE	LANE DAVENPORT FL 33897  (Principal LANE DAVENPORT FL 33897	office <u>str</u> iling add	eet address) ress, if different)	2021 AUG 11	
Name and street	LANE DAVENPORT FL 33897  (Principal LANE DAVENPORT FL 33897  (Current material address of Florida registered agent: (	office <u>str</u> iling add	eet address) ress, if different)	*1.**	
161 ALDRIDGE	LANE DAVENPORT FL 33897  (Principal LANE DAVENPORT FL 33897  (Current ma et address of Florida registered agent: ( ABDALBASET CHERIET  161 ALDRIDGE LANE  DAVENPORT	office <u>str</u> office <u>str</u>	eet address) ress, if different)	Williams of any	

#### 9. 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.

(Registered agent's signature)

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.

A. DIRECTORS						
□Chairman	Name: ABDELABASET CHERIET	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director	DAVENPORT FL 33891	□Director			_	
<b>■</b> President		□President				
□Vice President		□Vice President				
☐Secretary	□Treasurer	□Secretary		□Treasurer		
□Other		□Other		□Other		
□Chairman	Name:	□Chairman	Name:		_	
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
□President		□President				
□Vice President		□Vice President				
☐Secretary	□Treasurer	☐ Secretary		□Treasurer		
□Other	Other	□Other		⊞Other	1-7,	2021
□Chairman	Name:	□Chairman	Name:		77) 1 72) 1 73) 1	
□Vice Chairman	Address:	□Vice Chairman	Address:		-1 71	<u>\$</u>
□Director		Director			351 <del>351</del>	<del>5</del> <del>-</del>
□President		□President				
□Vice President		☐Vice President		<del></del>		
Secretary	☐ Treasurer	□Secretary		□Treasurer		
Other	Other	□Other		□Other		
Important Notice: individuals may be	Use an attachment to report more than six (6). The added to the index when fifting your Florida Dep	artment of State Annual Re	I for reporting port form.	purposes only, ?	Son-inde	xed
12		Charlest etor or Officer				

ABJELBASET CHERIET
(Typed or printed name and capacity of person signing application)

# State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of BASSETT COACH CORP. was filed on 01/13/2015, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

The Biennial Statement is past due.



\*\*\*

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 27th day of May two thousand and twenty-one.

Braden C Hylan

Brendan C Hughes
Executive Deputy Secretary of State