

8/12/2021

Division of Corporations

F210000465

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please****

Email Address: _____

FILED
2021 AUG 13 PM 4:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION**Millbrook Support Services, Inc.**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 04 |
| Estimated Charge | \$78.75 |

Electronic Filing Menu

Corporate Filing Menu

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Handwritten signature/initials
8/16/21

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.*

Millbrook Support Services, Inc.

1. Millbrook Support Services, 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 Florida)

2. New York 3. 56-2340980
(State or country under the law of which it is incorporated) (FEL number, if applicable)

4. 03/26/2003 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. 390 Plandome Road, Suite 216, Manhasset, NY 11030
(Principal office address)

_____ (Current mailing address, if different)

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

Name: C.T. Corporation System

Office Address: 1200 South Pine Island Road

Plantation, 33324
(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 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.

C.T. Corporation System

By: /s/ Eric Jensen Eric Jensen, Assistant Secretary
(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.

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CLERK OF STATE
MANHATTEN, FL

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman _____

Address _____

Vice Chairman: _____

Address: _____

Director: Andrew P. Doro ✓

Address: 21 Harts Village Road

Address: Millbrook NY 12545

Director: _____

Address: _____

B. OFFICERS

President: Andrew P. Doro ✓

Address: 21 Harts Village Road

Address: Millbrook NY 12545

Vice President: _____

Address: _____

Secretary: James L. Paterek ✓

Address: 37 Westgate Blvd, Plandome, NY 11030

Address: _____

Treasurer: Michael Ferrentino ✓

Address: 151 W. 17th Street, New York, NY 10011

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. /s/ Andrew P. Doro _____

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.

Andrew P. Doro

13. _____

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

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 CLERK OF STATE
 TALLAHASSEE, FL

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROSSANA ROSADO, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

| | |
|----------------------------------|----------------------------------|
| Entity Name: | MILLBROOK SUPPORT SERVICES, INC. |
| DOS ID Number: | 2886829 |
| Entity Type: | DOMESTIC BUSINESS CORPORATION |
| Entity Status: | EXISTING |
| Date of Initial Filing with DOS: | 03/26/2003 |
| Statement Status: | PAST DUE DATE |
| Statement Due Date: | 03/31/2021 |

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SECRETARY OF STATE
TALLAHASSEE, FL

No information is available from this office regarding the financial condition, business activity or practices of this entity.

WITNESS my hand and official seal of the Department of State,
at the City of Albany, on August 12, 2021 at 03:49 P.M.

ROSSANA ROSADO, Secretary of State



Brendan C. Hughes

By Brendan C. Hughes
Executive Deputy Secretary of State

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