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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: EUGENE KELLY, 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:

TES OCAMPO

	Name of Pers	son			
KARIMI & ASSOCIATES, CPAS					
	Firm/Compan	y			
16311 VENTURA BLVD STE 1111					
	Address				
ENCINO, CA 91436					
	City/State and 7	Zip code			
tes@karimicpa.com					
E-mail address	: (to be used for f	uture annual report notification)			
For further information concerning this matter, please call:					
TES OCAMPO	at (818)	380-0700			
Name of Person	Area Code	Daytime Telephone Number			
STREET/COURIER ADDRESS	5:	MAILING ADDRESS:			
Registration Section		Registration Section			
Division of Corporations		Division of Corporations			
The Centre of Tallahassee		P.O. Box 6327			
2415 N. Monroe Street, Suite 810		Tallahassee, FL 32314			

Tallahassee, FL 32303

□ \$87.50 Filing Fee,

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. EUGENE KELLY, INC.

,

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc." "Co," or "Corp.")

NEW YOR	<	3. 46-1442609	46-1442609		
(State or count	y under the law of which it is incorporated)	(FEI number, if	(FEI number, if applicable)		
11/21/2012		5			
(Date	e of incorporation)	(Date of duration, if other than perpetual)			
	(Date first transacted busines) (SEE SECTIONS 607.1501 & 607	s in Florida, if prior to registration) 1502, F.S., to determine penalty liab	pility)		
701 S OLIVE	AVENUE #623				
	(Principal o	office street address)			
16311 VEN	URA BLVD STE 1111, ENCINO	CA 91436			
	(Current mai	iling address, if different)			
Name and <u>stre</u>	et address of Florida registered agent: (I	P.O. Box <u>NOT</u> acceptable)			
Name and <u>stre</u>	et address of Florida registered agent: (F EUGENE J. KELLY	P.O. Box <u>NOT</u> acceptable)			
		P.O. Box <u>NOT</u> acceptable)			
Name:	EUGENE J. KELLY 701 S OLIVE AVENUE #623	P.O. Box <u>NOT</u> acceptable)	21 A		

Having been named as registered agent and to accept service of process for the above stated opporation 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.



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: EUGENE J. KELLY	Chairman	Name:
□Vice Chairman	701 S OLIVE AVENUE #523 Address: WEST PALM BEACH, FL 33401	□Vice Chairman	Address:
Director	EUGENE J. KELLY	Director	
ØPresident	EUGENE J. KELLY	□President	
□Vice President		□Vice President	<u></u>
Secretary	☐ Treasurer		Treasurer
Other	Other		Other
□Chairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
Director		Director	·····
□President		President	
DVice President		□Vice President	
Secretary	Treasurer	Secretary	□Treasurer
Other	Other	Other	Other
ElChairman	Name:	□Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
Director		Director	
□President		□President	
□Vice President		□Vice President	
Secretary	Treasurer		Treasurer
Other	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.

12.

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.

13. EUGENE J. KELLY

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of EUGENE KELLY, INC. was filed on 11/21/2012, 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.



WITNESS my hand and the official seal of the Department of State at the City of Albany, this 14th day of June two thousand and twenty-one.

Brandon C. Hughan

Brendan C Hughes