# F21000005207

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PICK-UP WAIT MAIL
(Business Entity Name)
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 994-7-18 4357219
AUTHORIZATION: Spelle Mas
COST LIMIT : \$ 70.00
ORDER DATE : September 8, 2021
ORDER TIME : 8:25 AM
ORDER NO. : 991718-005
CUSTOMER NO: 4357219
FOREIGN FILINGS
NAME: NUCHAM, CORP.
XXXX QUALIFICATION (TYPE: CO)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Alexxis Weiland EXT# 61592

EXAMINER:

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Nucham Corp.	
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:	
Gary Nudelinail Name of Person	
Name of Person	
Nucham Corp.	
Firm/Company	
3100 N Ocean Blvd # 1402	
Address	
FT. Lauderdale, FL 33308 City/State and Zip code	
City/State and Zip code	
Puchan (Optonline. net B-mail address: (to be used for future annual report notification)	
B-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Guar Nudel 516 425-9010	
Name of Person at (516) 425-9010  Area Code Daytime Telephone Number	
Final Code Saytime relephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, FL 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following amount:	
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & ☐ \$78.75 Filing Fee & ☐ \$87.50 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. Nucham, Corp. (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) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 3100 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address:

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.

Corporation Service Company

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: Gary Nude-man
Address: 3106 N Ocean Blud # 1402
FT. Lauderdale, FL 33308
Vice Chairman:
Address:
Director:
Address;
Director:
Address:
B. OFFICERS
President: Gary Nudelman
Address: 3100 N Ocean Blvoi # 1400
FT. Louderdale, FL 33308
Vice President:
Address:
Secretary:
Address:
Treasurer:
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12. Jaly Millelfance Pres. 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 berein
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. Gary Nude man, President.  (Typed or printed name and capacity of person signing application)
(Typed or printed name and capacity of person signing application)

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

#### 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 my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time certificate, the following entity information is reflected:

Entity Name:

NUCHAM, CORP.

**DOS ID Number:** 

1978803

**Entity Type:** 

DOMESTIC BUSINESS CORPORATION

**Entity Status:** 

**EXISTING** 

Date of Initial Filing with DOS:

12/05/1995

**Statement Status:** 

PAST DUE DATE

Statement Due Date:

12/31/2015

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 5 at the City of Albany, on September 08, 2021 at 05:56 P.A

ROSSANA ROSADO, Secretary of State

Brandon C Hydro

By Brendan C. Hughes

**Executive Deputy Secretary of State** 

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