# F21000005358

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





700371633117

08/17/21--01012--028 \*\*78.75

2021 SEPT / PR 3: 15

SEP 17 2021 M. SOLOMON

#### **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Alquiem, Inc.			
	of corporation -	must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Co "Certificate of Existence," or "Certificate above referenced foreign corporation to tr	of Good Stand	ing" and check are subn	t Business in Florida," nitted to register the
Please return all correspondence concerning	ng this matter t	to the following:	
Bella LaRiccia			
	Name of P	erson	
Alquiem, Inc.			
	Firm/Comp	pany	
201 South Biscayne Blvd., 28th Floor			
	Addres	SS	····
Miami, FL 33131			
	City/State an	d Zip code	
kpatel@alquiem.com			
E-mail address	: (to be used fo	or future annual report no	otification)
For further information concerning this m	atter, please ca	ill:	
300-1968 at ()			
Name of Person	Area Code	Daytime Teleph	one Number
STREET/COURIER ADDRESS Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, FI	ection rporations
Enclosed is a check for the following amore Please make check payable to: FLORIDA DE \$70.00 Filing Fee \$78.75 Filing Certificate of the following amore please make check payable to: FLORIDA DE \$70.00 Filing Fee \$78.75 Filing Certificate of the following amore pleases and the following amore pleases are payable to: FLORIDA DE \$70.00 Filing Fee \$78.75 Filing Certificate of the following amore pleases are payable to: FLORIDA DE \$70.00 Filing Fee \$78.75 Filing Certificate of the following amore pleases are payable to: FLORIDA DE \$70.00 Filing Fee \$78.75 Filing Certificate of the following amore pleases are payable to: FLORIDA DE \$70.00 Filing Fee \$78.75 Filing Certificate of the following amore pleases are payable to: FLORIDA DE \$70.00 Filing Fee \$78.75 Filing Certificate of the following amore pleases are payable to: FLORIDA DE \$70.00 Filing Fee \$78.75 Filing Certificate of the following amore pleases are payable to: FLORIDA DE \$70.00 Filing Fee \$78.75 Filing Certificate of the following amore pleases are payable to: FLORIDA DE \$70.00 Filing Fee \$78.75 Filing Certificate of the following amore pleases are payable to: FLORIDA DE \$70.00 Filing Fee \$70	EPARTMENT : g Fee &	OF STATE \$78.75 Filing Fee & Certified Copy	☐ \$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.

	orp," "Inc," "Co." or "Corp.")			_
(If name unavail	able in Florida, enter alternate corporate nan	ne :	adopted for the purpose of transacting business in Florida)	
New Jersey 3.		3.	84-2531356	
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
July 23, 2019		5	Perpetual	
(Date of incorporation)			(Date of duration, if other than perpetual)	
N/A			•	
201 South Biscay	rne Blvd., 28th Floor, Miami, FL 33131		ce street address)	_
	(Current ma	ilin	g address, if different)	202
Name and stree	et address of Florida registered agent: (F	P.O		2021 SEP 17
Name:		P.C		PH
	Bella LaRiccia	P.C		

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.



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: Bella LaRiccia	□Chairman Nar	me:	
□Vice Chairman	Address: 201 South Biscayne Blvd.	□Vice Chairman Ad	ldress:	
Director	28th Floor, Miami, FL 33131	□Director		
<b>■</b> President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	□ Secretary	□Treasurer	
□()ther	□Other	Other	□Other □	
□ Chairman	Name:	□Chairman Na	me:	
□Vice Chairman	Address:	□Vice Chairman Ad	ddress:	
□Director		□Director		
□President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer	
□Other	□Other	□Other	Other	202
				121 S
□Chairman	Name:	. □Chairman Na	ime:	2021 SEP 1.7
□Vice Chairman	Address:	□Vice Chairman Ac	ddress:	<del></del>
□Director		□Director		
□President		□ President		<u> </u>
□Vice President		□Vice President		
☐ Secretary	Treasurer	☐ Secretary	□Treasurer	
□Other	□Other	□Other	Other	
individuals may be	Use an attachment to report more than six (6).  added to the index when filing your Florida D  all fa ficul	epartment of State Annual Repor	rt form.	
12.	Signature of D	irector or Officer		
The officer or dire she is aware that f s.817.155, F.S.	ector signing this document (and who is listed in alse information submitted in a document to the	number 11 above) affirms that if Department of State constitutes	he facts stated herein are true a third degree felony as pro-	e and that he or vided for in

## STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

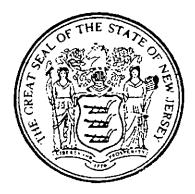
### ALQUIEM, INC. 0101052779

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic For-Profit Corporation was registered by this office on July 23, 2019.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

KUNJA PATEL 140 EAST RIDGEWOOD AVE SUITE 415 SOUTH TOWER PARAMUS, NJ 07652



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 1st day of July, 2021

Elizabeth Maher Muoio State Treasurer

Certificate Number: 6120707179

Verify this certificate online at

https://www.l.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp



September 17, 2021

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

RE: Dissolution of Alquiem, Inc.

Dear Sir/Madam:

As your records will reflect, we have voluntarily dissolved our business in the State of Florida on August 10, 2021. Please be advised that we have no intention of revoking the dissolution and hereby release the name for use to any other entity.

Should you have any questions, please forward your inquiries to <u>apatel@alquiem.com</u>. Thank you.

Very truly yours.

Bella La Riccia

BELLA LARICCIA President





### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 19, 2021

BELLA LARICCIA ALQUIEM, INC. 201 SOUTH BISCAYNE BLVD., 28TH FLOOR MIAMI, FL 33131

SUBJECT: ALQUIEM, INC. Ref. Number: W21000114576

We have received your document for ALQUIEM, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon
Senior Section Administrator

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Letter Number: 121A00019904