

F21000005436

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

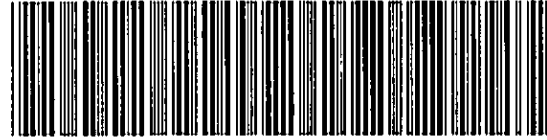
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Certificates of Status

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08/24/21--01020--016 **18.15

FILED
2021 OCT -1 AM 9:59
CLERK OF STATE
TALLAHASSEE, FL

SP



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 27, 2021

CATHERINE KASTNING
350 FIFTH AVENUE 41ST FLOOR
NEW YORK, NY 10118

SUBJECT: ISAIA CORP
Ref. Number: W21000118002

We have received your document for ISAIA CORP 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 an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

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

Suzanne Hawkes
Regulatory II

Letter Number: 221A00020756

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Isaia 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:

Catherine Kastning

Name of Person

Funaro & Co., P.C.

Firm/Company

350 Fifth Avenue, 41st Floor

Address

New York, NY 10118

City/State and Zip code

catherine.kastning@funaro.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Catherine Kastning

at (212) 273-5394

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to **FLORIDA DEPARTMENT OF STATE**

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$78.75 Filing Fee &
Certified Copy | <input type="checkbox"/> \$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.*

1. ISAIA 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)
2. New York 3. _____
(State or country under the law of which it is incorporated) (FFI number, if applicable)
4. July 12, 2005 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)
6. July 30, 2021
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 257 Park Avenue S, 10th Floor, New York, NY 10010
(Principal office street address)

(Current mailing address, if different)

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

Name: BLUMBERGEXCELSIOR CORPORATE SERVICES, INC

Office Address: 155 Office Plaza Drive, 1st Floor

Tallahassee, Florida 32301
(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.

Jose Wojica, Asst Sec.

(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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and or directors [up to six (6) total].

FILED
2021 OCT -1 AM 10:00
DEPT. OF STATE
TALLAHASSEE, FL

A. DIRECTORS

☒ Chairman Name: Gianluca Isaia
☐ Vice Chairman Address: 257 Park Avenue S
☒ Director 10th Floor
☐ President New York, NY 10010
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

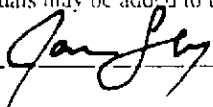
☐ Chairman Name: Barbara Isaia
☐ Vice Chairman Address: Via Roma, 44
☒ Director 80013 Casalnuovo di Napoli (NA)
☐ President Italy
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Anthony Bozzi
☐ Vice Chairman Address: 257 Park Avenue S
☐ Director 10th Floor
☐ President New York, NY 10010
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Enrico Isaia
☐ Vice Chairman Address: Via Roma, 44
☒ Director 80013 Casalnuovo di Napoli (NA)
☐ President Italy
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: James Shay
☐ Vice Chairman Address: 257 Park Avenue S
☐ Director 10th Floor
☒ President New York, NY 10010
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ 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.817.135, F.S.

13. James Shay, President
(Typed or printed name and capacity of person signing application)

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:	ISAIA CORP.
DOS ID Number:	3229688
Entity Type:	DOMESTIC BUSINESS CORPORATION
Entity Status:	EXISTING
Date of Initial Filing with DOS:	07/12/2005
Statement Status:	CURRENT
Statement Due Date:	07/31/2021

I certify that the following is a list of documents on file in the Department of State for said entity:

Document Type:	CERTIFICATE OF INCORPORATION
Date of Filing:	07/12/2005
Entity Name:	ISAIA CORP.

Document Type:	BIENNIAL STATEMENT
Date of Filing:	07/23/2007
Effective Date:	07/01/2007

Document Type:	BIENNIAL STATEMENT
Date of Filing:	09/30/2010
Effective Date:	07/01/2009

Document Type: BIENNIAL STATEMENT
Date of Filing: 10/22/2014
Effective Date: 07/01/2013

Document Type: BIENNIAL STATEMENT
Date of Filing: 08/24/2015
Effective Date: 07/01/2015

Document Type: CERTIFICATE OF CHANGE
Date of Filing: 08/24/2016

Document Type: BIENNIAL STATEMENT
Date of Filing: 07/05/2017
Effective Date: 07/01/2017

Document Type: BIENNIAL STATEMENT
Date of Filing: 07/17/2019
Effective Date: 07/01/2019

Above space is left blank intentionally.

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
11:12 A.M.



ROSSANA ROSADO, Secretary of State

Brendan C. Hughes

By Brendan C. Hughes
Executive Deputy Secretary of State