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APPL:CATION 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.	MICHAEL S. DAIELL	-, P.C.
	(Enter name of corporation; must include "INCORPORATEE)," "COMPANY," "CORPORATION,"
	"Inc.," "Co.," "Corp." [Inc," "Co." or "Corp.")	
		Q C Luis
	MICHAEL S. DAIELL (If name unavailable in Florida, enter alternate corporate name	<u> </u>
	9 1	
Ç.	NEW YORK (State or country under the law of which it is incorporated)	11-3131856
	(State or country under the law of which it is incorporated)	(FEI number, if applicable)
А	11-6-1992 5	
-1.	<u>11-6-1992</u> 5 (Date of incorporation)	(Date of duration, if other than perpetual)
,		
0.	(Date first transacted business	in Florida, if prior to registration)
		1502, F.S., to determine penalty liability)
7	5443 SAN MARINO WAY,	LAKE WORTH FL 33467
•••	(Principal of	ffice <u>street</u> address)
	6742 FOREST HILL BLUD. #30	7, GREENACRES, FL 33413
	(Current mail	ing address, if different)
		621
8.	Name and street address of Florida registered agent: (P	.O. Box <u>NOT</u> acceptable)
	Name: MICHAEL S. DAIE	-
Ō	Mice Address: 5443 San Marino	Way
	Lake Worth (City)	(Zip code)

9. Registered agent's acceptance:

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x

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 gertificate 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 MICHAEL S. DAIELL	- Chairman	Name:		
□Vice Chairman	Address: 5443 San Marino W		Address:		
Director	Lalee Worth, FL 3346	7 Director		· · · · · · · · · · · · · · · · · · ·	
		□President			
□Vice President		□Vice President			
Secretary	Treasurer			□Treasurer	
□Other	Other	Other		D0thci	
□ Chairman	Name:	Chairman	Name:		
□Vice Chairman	Address:	🗇 Vice Chairman	Address:		
Director		Director			
□President		□President			
□Vice President		□Vice President			
□Secretary		Secretary		Treasurer	
Other	Other	□Other		□Other	
□Chairman	Name:	□ Chairman	Name:	101	
□Vice Chairman	Address:	□Vice Chairman	Address:	יד ד	
Director		Director			
President		□President			
□Vice President		□Vice President			
DSecretary		Secretary			
DOther	□Other	Other		Dother	
I2 The officer or direction she is aware that fa	Use an attachment to report more than six (6). The added to the index when filing your Florida Dep i Signature of Director signing this document (and who is listed in missing information submitted in a document to the D	artment of State Annual Re ctor or Officer umber 11 above) affirms that	port form.	al herein are true and that he o	
s.817.155, F.S. 13	13. <u>Michael S. Daiell President</u> (Typed or printed name and capacity of person signing application)				

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		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: DOS 1D Number:		MICHAEL S. DAIELL, P.C.				
Entity Type:						
Entity Status:		EXISTING				
Date of Initial Filing	with DOS:	11/06/1992				
1						
Statement Status:	PAST DUE DATE					
Statement Due Date:		11/30/1995				
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	,					
	1					
No information is availa	ble from this office regard	ng 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 September 27, 2021 at 02:26 P.M.				
	EOFNEW					
ll y		ROSSANA ROSADO, Secretary of State				
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J		Brandon C. Hughan				
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	The states of th	Du Davadara (1. Uvali sa				
	MENT OF	By Brendan C. Hughes Executive Deputy Secretary of State				
	********	Executive Deputy Secretary of State				
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Authentication Number: 100000413247 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at <u>http://ecorp.dos.ny.gov</u>						



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 17, 2021

MICHAEL S DAIELL 6742 FOREST HILL BLVD #307 GREENACRES, FL 33413 US

SUBJECT: MICHAEL S DAIELL, P.C. Ref. Number: W21000137582

We have received your document for MICHAEL S DAIELL, P.C. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law does not provide for the recognition of a foreign professional corporation. An acceptable corporate suffix will need to be added to your entity name for this Department to accept and file your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Sharon D Franklin Regulatory Specialist II

Letter Number: 921A00025248

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Division of Cornerations, P.O. BOX 6327 Tallahassee, Florida 32314