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Office Use Only

COVER LETTER

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TO: Registration Section Division of Corporations

SUBJECT: _____ RJK Business Consulting, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

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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:

Robert Kleinwaks

·	Name of P	crson	
RJK Business Consulting, Inc.			
	Firm/Comp	an <u>v</u>	
40 Westland Drive			
	Addres		
Glen Cove, NY 11542			
	City/State and	d Zip code	
drkleinwaks@gmail.com			
-	ddress: (to be used fo	r future annual report n	otification)
For further information concerning Dari Marder	·		
Name of Person	at (<u>516</u> Area Code	_) Daytime Teleph	ione Number
STREET/COURIER AD Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Su Tallahassee, FL 32303		MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, Fl	rporations
0	IDA DEPARTMENT O	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.

RJK Business Consulting, Inc. 1.

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

(If name unavaila	ible in Florida, enter alternate corporate nar		ig business in Fiorida)
New York		3. 84-3842837	
(State or country	y under the law of which it is incorporated)	(FEI number, if ap	plicable)
Deember 2019		5	
(Date	of incorporation)	(Date of duration, if other	than perpetual)
·			
	(Date first transacted busines (SEE SECTIONS 607.1501 & 60	ss in Florida, if prior to registration) 7,1502, F.S., to determine penalty liabili	ity)
40 Westland Driv	e, Glen Cove, NY 11542		
	(Principal	office <u>street</u> address)	
······	(Current ma	ailing address, if different)	
. Name and <u>stree</u> Name:	e <u>t address</u> of Florida registered agent: (Camryn Kleinwaks	(P.O. Box <u>NOT</u> acceptable)	2021 NOV 19 SECRE MADY FALL AHASS
Office Address:	201 West Laurel Street, PH6		
	Tampa	Florida <u>33602</u>	PH 4:03 of SIATE E. FLORIDA
	(City)	(Zip code)	$\mathbf{\omega}$

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.

Deinvako (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.

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:	RJK BUSINESS CONSULTING INC.
DOS ID Number:	5664432
Entity Type:	DOMESTIC BUSINESS CORPORATION
Entity Status:	EXISTING
Date of Initial Filing with DOS:	12.02 2019
Statement Status:	CURRENT
Statement Due Date:	12/31/2021

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 November 17, 2021 at 05:33 P.M.

ROSSANA ROSADO, Secretary of State

Brandon C. Highes

By Brendan C. Hughes Executive Deputy Secretary of State

Authentication Number: 100000653095 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>