# F22000000960

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S. HAWKES FEB \_ = 2021 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 488824 5840A

AUTHORIZATION : Of the Control

COST LIMIT : \$ 70:00

ORDER DATE: February 15, 2022

ORDER TIME : 9:38 AM

ORDER NO. : 488824-005

CUSTOMER NO: 5840A

## FOREIGN FILINGS

NAME: FRONT STREET COMMODITIES

CORPORATION

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

# **COVER LETTER**

	tion Section of Corporations	
SUBJECT:		ODITIES CORPORATION
	Name of corpo	ation - must include suffix
Dear Sir or Mada	am:	
"Certificate of E	pplication by Foreign Corporatio xistence," or "Certificate of Good foreign corporation to transact b	n for Authorization to Transact Business in Florida," Standing" and check are submitted to register the usiness in Florida.
Please return all	correspondence concerning this r	natter to the following:
	Steven I. Green	wald, Esq.
	Nan	e of Person
	Law Offices of	Steven I. Greenwald, P.A.
		Company eral Highway, Suite 105
	Boca Raton, FL	Address 33487
	City/Si sigreenwaldlaw	atc and Zip code @att.net ,
	E-mail address: (to be u	sed for future annual report notification)
For further inform	nation concerning this matter, ple	
Susan Marg	at (	51 994-5560 x 104
Name of	Person Area	Code Daytime Telephone Number
Registrati Division o The Centr 2415 N. N	on Section of Corporations re of Tallahassee Monroe Street, Suite 810 ee, FL 32303	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
	ck for the following amount: payable to: FLORIDA DEPARTM fee	ENT OF STATE  \$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certified Copy 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.

	-	e corporate name adop	ted for the purpose of transacting	business in Florida)
Penns	sylvania	3	23-2775345 (FEI number, if app	£11.1.3
•				
Augus	of incorporation)	5	(Date of duration, if other th	nan perpetual)
,	, ,			• • •
			rida, if prior to registration) F.S., to determine penalty liability	y)
9680	Macciato Avenue	Boca Rato	on, FL 33496	
		(Principal office st	r <u>eet</u> address)	
		(Current mailing add	lress, if different)	2-3
	et address of Florida registe Corporation Service Comp	ered agent: (P.O. Bo		
Name and <u>stre</u> Name: ice Address:	<del>-</del>	ered agent: (P.O. Bo		: 15
Name:	Corporation Service Comp	ered agent: (P.O. Bo	x <u>NOT</u> acceptable)	
Name:	Corporation Service Comp	ered agent: (P.O. Bo		25 - 16 MHO:

<sup>10.</sup> 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.

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

A. DIRECTORS						
□ Chairman	Name:	□ Chairman	Name: James C. Grossman			
□Vice Chairman	Address: 9680 Macciato Avenue	☐ Vice Chairman	Address: 9680 Macciato Ave.			
Director	Boca Raton, FL 33496	Director	Boca Raton, FL 33496			
□President		XI President				
□Vice President	<del></del>	□ Vice President				
Secretary	☐ Treasurer	<b>X</b> □Secretary	<b>₫</b> Treasurer			
Other	□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	□Other	□Other			
Chainnan	Name;	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		Director				
□President		□President				
□Vice President		□Vice President				
☐Secretary	Treasurer	☐ Secretary	[] Treasurer			
□Other	□Other	□Other	Other			
□Chairman	Name:	☐Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		☐ Director				
□President		□President				
□Vice President		□Vice President				
☐Secretary	□Treasurer	☐Secretary	□Treasurer			
Other	□Other	□Other	□Other			
mportant Notice: Undividuals may be o	Isc an attachment to report more than six (6). The atta added to the index when filing your Florida Department	ent of State Annual Re	I for reporting purposes only. Non-indexed port form.			
	Signature of Director of	or Officer				
The officer or direct he is aware that fals .817.155, F.S.	or signing this document (and who is listed in numbe se information submitted in a document to the Depart	er 11 above) affirms the	at the facts stated herein are true and that he or es a third degree felony as provided for in			
3	JAMES C. GROSSMAN					
(Typed or printed name and capacity of person signing application)						

# COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE 12/29/2021

## TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

#### FRONT STREET COMMODITIES CORPORATION

is duly registered as a Pennsylvania Business Corporation under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

THE COLUMN THE CONTRACT OF THE

IN TESTIMONY WHEREOF, I have hereinto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written

Acting Secretary of the Commonwealth

Certification Number: TSC211229110723-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify