

F22000001 335

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

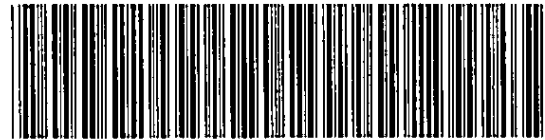
(Document Number)

Certified Copies _____ Certificates of Status _____

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FEB 14 33

S. HAWKES
FEB - 2021



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 22, 2022

PILLOW PADS INC
39 GROVE ST #4R
NEW YORK, NY 10014

We have received your document for PILLOW PADS INC . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must include the purpose(s) for which the corporation is authorized in the home state or country to be carried out in the state of Florida. Please make such correction to number 8 of the application.

Please give a more detailed reason why this corporation is not for profit filing.,

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

Suzanne Hawkes
Regulatory II

Letter Number: 722A00004383

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PILLOW PADS INC
Name of Corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Dustin Martelo

Name of Person

PILLOW PADS INC

Firm/Company

39 GROVE ST. #4R

Address

New York, New York 10014

City/State and Zip Code

dustinmartelo@gmail.com

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

For further information concerning this matter, please call:

Dustin Martelo

at (443) 783 - 4173
Area Code Daytime Telephone Number

Name of Person

Mailing Address:

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

Street Address:

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

Enclosed is a check for the following amount:

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

☒ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1502, FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA

1 PILLOW PADS INC.

(Name of corporation must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like
import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained
in the name at present "Company" or "Co" may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2 DELAWARE 3 83 - 3366296
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4 28JAN2019 5
(Date of Incorporation) (Date of duration, if other than perpetual)

6
(Date first conducted affairs in Florida if prior to registration See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7 1061 EAST INDIANTOWN ROAD JUPITER, FL 33477
(Principal office street address)

(Current mailing address, if different)

8 REAL ESTATE BROKERAGE
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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

Name BRAD HAY
Office Address 1061 EAST INDIANTOWN RD
JUPITER, Florida 33477
(City) (Zip Code)

10 Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation in the above
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.



(Registered agent's signature)

11 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

RECEIVED
JAN 28 4 30 PM '19
STATE

12. 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: DUSTIN MARTELO
☐ Vice Chairman Address: 39 GROVE ST #4R
☒ Director NEW YORK, NEW YORK
☒ President 10014
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: PATRICK MURPHY
☐ Vice Chairman Address: 5 ELLEN COURT
☒ Director RYE, NY 10580
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

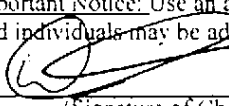
☐ Chairman Name: BRAD HAY
☐ Vice Chairman Address: 1061 EAST INDIANTOWN RD
☐ Director JUPITER, FL 33477
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: MANAGER ☐ Other: _____

☐ Chairman Name: DANIEL NUWASH
☐ Vice Chairman Address: 73-11 210TH ST APT 6M
☒ Director OAKLAND GARDENS, NY 11364
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

NOTE: 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.

13.  _____
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. DUSTIN MARTELO _____
(Typed or printed name and capacity of person signing application)

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PILLOW PADS INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF JANUARY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PILLOW PADS INC." WAS INCORPORATED ON THE TWENTY-EIGHTH DAY OF JANUARY, A.D. 2019.




Jeffrey W. Bullock, Secretary of State

7256464 8300C

SR# 20214215633

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202403970

Date: 01-14-22