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### **COVER LETTER**

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SUBJ	ECT:		<u> </u>		<del></del>
		Name of corp	oration - mi	ast include suffix	
Dear S	ir or Madam:				
"Certif	icate of Existe	eation by Foreign Corporati nee." or "Certificate of Goo eign corporation to transact	od Standing	" and check are sub	
Please	return all cor	respondence concerning thi	is matter to	the following:	
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			Address		
Canons	burg, PA 15317				
			State and Z	ip code	
marissa	⟨a getamplifiedl				
		E-mail address: (to be	used for fu	ture annual report r	notification)
For fur	ther information	on concerning this matter, p	olease call:		
Marissa	a Mitchell	at ( 72-1	7	12-0539	
	Name of Per		ea Code	Daytime Telep	hone Number
	Registration . Division of C The Centre o	forporations f Tallahassee froe Street, Suite 810		MAHANG A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7
		or the following amount: able to: FLORIDA DEPART	MENT OF	STATE	
	.00 Filing Fee		% □ \$78	8.75 Filing Fee & rtified Copy	☐ \$87.50 Filing Fee, Certificate of Status of 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.

	dopted for the purpose of transacting bu	mires: 11		,
<b>n</b>				
the law of which it is incorporated)	rated) 88-0799301 (FEI number, if applicable)			
·	(, ,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,		
(Date of incorporation) (Date of duration, i			<u>.</u>	
(SEE SECTIONS 607.1501 & 607.15		TACE.	2022	_ <del></del>
7. 331 W 39th Street New York, NY 10018			_=_	
(Principal offic	e <u>street</u> address)		8 1	1 11 am
132 SW 9th Street Miami, FL 33130			AH 9:	
(Current mailing	g address, if different)	<u> </u>	-6	<del>_</del> .
3	Box <u>NOT</u> acceptable)			
y Weber				
V 9th Street				
, F1.	33130			
(City)	(Zip code)			
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15) w York, NY 10018  (Principal office)  FL 33130  (Current mailing)  s of Florida registered agent: (P.O. by Weber  V 9th Street  FL (City)	(Date of duration, if other than  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) w York, NY 10018  (Principal office street address)  (Furget mailing address, if different)  g of Florida registered agent: (P.O. Box NOT acceptable) y Weber  V 9th Street  (Fig. 33130 (City) (Zip code)	(Date of duration, if other than perpetus  (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  (Principal office street address)  (Principal office street address)  (Current mailing address, if different)  (Current mailing address, if different)  (See Sections 607.1501 & 607.1502, F.S., to determine penalty liability)  (Principal office street address)  (Current mailing address, if different)  (Current mailing address, if different)	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  (Principal office street address)  (Principal office street address)  (Current mailing address, if different)  S of Florida registered agent: (P.O. Box NOT acceptable)  (Yeth Street  (Fig. 33130  (City)  (City)  (City)  (Date of duration, if other than perpetual)  (Page 14.1502, F.S., to determine penalty liability)  (Principal office street address)  (Principal office street address)  (Principal office street address)  (Principal office street address)  (City)  (City)  (City)  (City)  (City)  (City)  (City)  (City)

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.

#### A. DIRECTORS Wesley Weber ☐ Chairman Name: \_ Name: \_\_\_\_\_ \_ Chairman 132 SW 9th Street □ Vice Chairman Address: Miami, FL 33130 Address: L. Vice Chairman Director □ Director N President □President . Vice □Vice Presidem President ☐Treasurer □ Secretary ☐Treasurer Secretary ☐Other\_\_\_\_\_ □Other \_\_\_\_\_ □Other\_\_\_\_\_ \_ Other Chairman □ Chairman Name: .. Vice Chairman - Address:\_\_\_\_\_ □Vice Chairman Address: 7. Director □ Director "President □ President . Vice President ☐ Vice President Secretary □Treasurer □ Secretary □Treasurer Other\_\_\_\_ □Other\_\_\_\_\_ □Other\_\_\_\_\_ □Other \_\_\_\_\_ Chairman Name: ElChairman Name: Vice Chairman Address: Address: □ Vice Chairman Director □ Director \_: President □President . Vice President\_\_\_\_\_ □Vice President 2 Secretary □Treasurer □Secretary ☐ Treasurer ,Other\_\_\_\_ □Other\_\_\_\_\_ □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. 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.817.155, F.S. Wesley Weber

#### STATE OF NEW YORK

#### DEPARTMENT OF STATE

#### Certificate of Status

1. ROBERT J. RODRIGUEZ. 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:** 

THE FORTITUDE FIRM, INC.

DOS ID Number:

6403949

Entity Type:

DOMESTIC BUSINESS CORPORATION

**Entity Status:** 

**EXISTING** 

Date of Initial Filing with DOS:

02/14/2022

Statement Status:

**CURRENT** 

Statement Due Date:

02/29/2024

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 July 05, 2022 at 02:32 P.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C. Heylson

By Brendan C. Hughes

**Executive Deputy Secretary of State** 

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