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COVER LETTER

TO:	Registration Section Division of Corporation					
	Cincinnati Wa					
SUB.	JECT:					
		Name of corporat	ion - mu	ist include suffix		
Dear	Sir or Madam:					
"Certi	ificate of Existence."	by Foreign Corporation or "Certificate of Good Sorporation to transact bus	tanding	" and check are sub		
	e return all correspond hy Zenderman	lence concerning this ma	tter to th	ne following:		
		Name	of Perso	on		
Cincin	mati Washboards Co.					
	 	Firm/C	Company	,		
7421 E	Beachview Dr.		• -			
		Ac	ldress	·= -		
North	Bay Village, FL 33141					
		City/Stat	e and Z	ip code		
hello@	Peineinnatiwashboards.c	on				
	I	E-mail address: (to be use	ed for fu	ture annual report r	otification)	
For fu	urther information con	cerning this matter, pleas	se call:			
Timothy Zenderman 305			9	926-3805		
		at (
	Name of Person	Area C	lode	Daytime Telep	hone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Please	sed is a check for the make check payable to:		□ \$78	STATE 3.75 Filing Fee & rtified Copy	S87.50 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. Cincinnati Washboards Co. 1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 88-3374469 (FEI number, if applicable) (State or country under the law of which it is incorporated) July 19, 2022 __ 5. ____ (Date of duration, if other than perpetual) (Date of incorporation) This is a new business, there have been no transactions yet. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7421 Beachview Dr. North Bay Village, FL 33141 (Principal office street address) 7421 Beachview Dr. North Bay Village, FL 33141 (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Timothy Zenderman Name: 7421 Beachview Dr. Office Address: North Bay Village (City) 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.

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	Luciano Pellegrini						
□ Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Salguero 1911 Address:	□Vice Chairman	Address:				
□Director	4*C	□Director					
■ President	Ciudad Autonoma de Buenos Aires	□President					
□Vice President	Argentina	□Vice President					
□ Secretary	□Treasurer	☐ Secretary	☐Treasurer				
□Other		Other					
Other		Corner	COner				
□Chairman □Vice Chairman	Name:	□Chairman □Vice Chairman	Name:Address:				
□Director	North Bay Village, FL 33141	□Director					
□President		□President					
□Vice President		□Vice President					
■ Secretary	□Treasurer	□Secretary	□Treasurer				
□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	___\ \text{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. 12. Signature of Director of 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.							
Timothy Zenderman, Secretary 13.							



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CINCINNATI WASHBOARDS CO." 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 TWENTIETH DAY OF SEPTEMBER, A.D.

2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CINCINNATI WASHBOARDS CO." WAS INCORPORATED ON THE NINETEENTH DAY OF JULY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.



Authentication: 204439153

Date: 09-20-22