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Division of Corporations

Fax Number : (850)617-6383

From:

: ALLSTATE CORPORATE SERVICES CORP Account Name

Account Number : I20040300031

Phone

: (800)906-9220

Fax Number

: (800)906-9880

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

FOREIGN PROFIT/NONPROFIT CORPORATION ISLAND ENVIRONMENTAL SERVICES CORP

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S. ROBERTS

JAN 18 2023

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.

(If name unavail	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting	ng business in	Florida)
NEW YORK	3.			
	y under the law of which it is incorporated)		•	
03/19/2012	5			
(Date	of incorporation)	(Date of duration, if other than perpetual))
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502	torida, if prior to registration) I, F.S., to determine penalty liabili	ty)	
TEE VIEW CO	OURT. MANORVILLE, NY 11949			20
	(Principal office	<u>street</u> address)	**************************************	23 J.; t
	(Current mailing a	iddress, if different)	<u> </u>	
Name and <u>stree</u> Name:	et address of Florida registered agent: (P.O. E Registered Agent Solutions, Inc.	Box <u>NOT</u> acceptable)	r	/H 10: 4
īce Address:	155 Office Plaza Dr. Suite A			ω
mics Address.	Tallahassec			
	(City)	(Zip code)		
ving been nam ignated in this ther agree to co	ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointmer omply with the provisions of all statutes rela with and accept the obligations of my positi	it as registered agent and agre tive to the proper and complet	e to act in th	us capac
	/S/ Avi Weiss, Assistant Secreta	ry		

^{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						
□ Chairman	Name: ANTHONY SPARACIO	□Chairman	Name:			
□Vice Chairman	Address:	□ Vice Chairman	Address:			
□ Director	MANORVILLE, NY 11949	Director				
■ President		□ President				
□ Vice President		□Vice President				
☐ Secretary	☐Treasurer	□Scoratary	☐ Treasure:			
□ Other	☐ Other	□Other	Other			
□ Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:	□ Vice Chairman	Addiess:			
Director		□Director				
President		☐President				
□Vice President		□ Vice President				
☐ Secretary	□'l'reasurer	□Secretary	☐ Treasurer			
Other	Other	□Other	Other			
□ Chairman	Name:	□Chairman	Name:			
□ Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		Director				
□President		□President				
□Vicc President		☐ Vice President				
□ 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.						
12. /s/ ANTHONY SPARACIO 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.						
13. ANTHONY SPARACIO (Typed or printed name and capacity of person signing application)						
(1) yeer or printed name date capacity of person signing application)						

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, 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: ISLAND ENVIRONMENTAL SERVICES CORP

DOS ID Number: 4218749

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING

Date of Initial Filing with DOS: 03/19/2012

Statement Status: CURRENT

Statement Due Date: 03/31/2024

I certify that the following is a list of documents on file in the Department of State for said entity:

Document Type: CERTIFICATE OF INCORPORATION

Date of Filing: 03/19/2012

Entity Name: ISLAND ENVIRONMENTAL SERVICES CORP

Document Type: BIENNIAL STATEMENT

 Date of Filing:
 01/13/2023

 Effective Date:
 03/01/2022

Above space is left blank intentionally.

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 January 13, 2023 at 09:29 A.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon Co Heylan

By Brendan C. Hughes
Executive Deputy Secretary of State

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