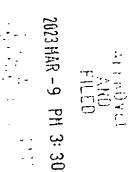
# F23000001382

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
\ <u>-</u> ,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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February 25, 2023

PAMELA MEYERSON 4910 SPARKLING SEA LANE BRADENTON, FL 34211

SUBJECT: PAM MEYERSON & ASSOCIATES, PC

Ref. Number: W23000026240

We have received your document for PAM MEYERSON & ASSOCIATES, PC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law does not provide for the recognition of a foreign professional corporation. An acceptable corporate suffix will need to be added to your entity name for this Department to accept and file your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6053.

Letter Number: 323A00004536

Yvette Scott Supervisor

www.sunbiz.org

#### **COVER LETTER**

Ų.	tration Section on of Corporat				
SHR IFCT.	Pam Meyerson	& Associates, PC			
SUBJECT.		Name of corpor	ntion - mu	st include suffix	
Dear Sir or M	adəm:				
"Certificate of	Existence," of	y Foreign Corporatior r "Certificate of Good poration to transact bu	Standing <sup>*</sup>	and check are subm	Business in Florida," itted to register the
Please return a	ıll corresponde	nce concerning this m	atter to th	e following:	
Pamela Meyers	ion				
		Nam	e of Perso	on	
Pam Meyerson	& Associates, I	PC .			
		Firm	Company		
4910 Sparkling	Sea Lane				
			Address		
Bradenton, FL	34211				
		City/St	ate and Zi	p code	
dave@daveme	yersonlaw.com				
	E	-mail address: (to be u	sed for fu	ture annual report no	etification)
For further inf	formation conc	erning this matter, ple	ase call:		
David Meyerso	on	at ( <u>847</u>	) 2	93-2036	
Name	e of Person		Code	Daytime Telepho	one 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		
Enclosed is a Please make ch	eck payable to:	ollowing amount: FLORIDA DEPARTM \$78.75 Filing Fee & Certificate of Status	□ \$78	STATE 3.75 Filing Fee & rtified Copy	☐ \$87.50 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.

(Enter name of c	orporation: must include "INCORPORATED," orp," "Inc." "Co," or "Corp.")	" "COMPANY," "CORPORATIO	N."		
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transactir	ng business in Florida)		
2. Illinois	3	20-3609480			
(State or countr	y under the law of which it is incorporated)	(FE1 number, if applicable)			
4. October 12, 200	5.	perpetual			
(Date	of incorporation)	(Date of duration, if other than perpetual)			
6. June 16, 2022					
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration) 502, F.S., to determine penalty liabil	ity)		
7. 4910 Sparkling S	ea Lane, Bradenton, FL 34211				
	(Principal offi	ce street address)			
Same			202		
		ng address, if different)	23 HAR -		
8. Name and street	<u>et address</u> of Florida registered agent: (P.C	D. Box NOT acceptable)	-9 E		
Name:	David Meyerson	<del></del>	PH D		
Office Address:	4910 Sparkling Sea Lane				
	Bradenton	Florida <u></u>	ے		
	(City)	(Zip code)			

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.

(Registered agent's signature)

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							
<b>≡</b> Chairman	Name: Pamela Meyerson	□Chairman	Name:				
□Vice Chairman	4910 Sparkling Sea Lane Address:	□Vice Chairman	Address:				
Director	Bradenton, FL 34211	□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			
□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			
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. Canada 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.

Pamela Meyerson

#### File Number

6452-540-9



## To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the

### Department of Business Services. I certify that

PAM MEYERSON & ASSOCIATES, P.C., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON OCTOBER 12, 2005, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 1ST day of FEBRUARY A.D. 2023.

Authentication #: 2303202766 verifiable until 02/01/2024

Authenticate at; https://www.ilsos.gov

Alexi Gianarah