(1	Requestor's Name)		-
(/	Address)		-
(1	Address)		-
((	City/State/Zip/Phone	#)	-
PICK-UP	MAIT	MAIL MAIL	
3)	Business Entity Name	*}	-
	Document Number)		-
Copies	Certificales	s of Stalus	
Linstructions to F	ılıng Officer;		
····			

Office Use Only



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APR 27 2023

K. Brumble)

### Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

# incserv

### **ORDER FORM**

To Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

FROM Melissa Moreau mmoreau@incserv.com

850.656.7953

REQUEST_DATE : 4/27/2023	PRIORITY Regular Approval	OUR REF_#_(Order_ID#_)   114301

ORDER ENTITY

ERIC EMANUEL APPAREL INC.

PLEASE PERFORM THE FOLLOWING SERVICES:	 	 	
FRICEMANUEL APPARELING (FL)			

File the attached foreign qualification document

NOTES:	•	• •	
\$70.00 Authorized			
Émail address for annual rep	ort reminders: Jean@clasinfo.com <sup>7</sup>		

### RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Thursday, April 27, 2023 Page 1 of 1

## 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 unavaila	able in Florida, enter alternate corporate nan	ne adop	ted for the purpose of transacting bus	iness in Florida)
New York	•	n/a	, ,	
(State or country 11/26/2018	y under the law of which it is incorporated)		(FEI number, if applical	ble)
(Date	(Date of incorporation) (Date of duration, if other than perpetual)			perpetual)
	(SEE SECTIONS 607.1501 & 607 et, Apt 3, New York, New York, 10011 (Printet, Apt 3, New York, New York, 10011		F.S., to determine penalty liability)  Tice address)	
	(Current ma	illing ad	dress, if different)	2023 AFR
Name and stree	et address of Florida registered agent: ( NRAI Services, Inc.	Р.О. В	ox <u>NOT</u> acceptable)	PR 27
ffice Address:	1200 South Pine Island Road		<del>-</del> -	Pii 6:
	Plantation,		Florida	: 39
	(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.

By:

NRAI Services, Inc.

Jean Malcomson, Asst. Secretary of NRAI Services, Inc.

(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.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS
Chairman:
Address:
Vice Chairman:
Address:
Eric Emanuel Director:
515 W. 23rd Street, Apt 3, New York, New York, 10011
Address:
Director:
Address:
B. OFFICERS
President: Eric Emanuel
515 W. 23rd Street, Apt 3, New York, New York, 10011
Vice President:
Address:
Eric Emanuel Secretary:
515 W. 23rd Street, Apt 3, New York, New York, 10011 Address:
Eric Emanuel Treasurer:
515 W. 23rd Street, Apt 3, New York, New York, 10011 Address:
NOTE:   Docusioned by: may attach an addendum to the application listing additional officers and/or directors.
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. Eric Emanuel, President
(Typed or printed name and 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: ERIC EMANUEL APPAREL INC

**DOS ID Number:** 5448692

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING
Date of Initial Filing with DOS: 11/26/2018

Statement Status: CURRENT Statement Due Date: 11/30/2024

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 April 26, 2023 at 04:10 P.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C Hughan

By Brendan C. Hughes Executive Deputy Secretary of State

Authentication Number: 100003385306 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at <a href="http://ecorp.dos.ny.gov">http://ecorp.dos.ny.gov</a>