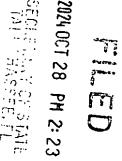
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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M. SOLOMON GCT 2 9 2024

# **COVER LETTER**

TO: Registration Second Division of Cor					
SUBJECT: North East	st Marketing Inc •				
SUBSECT.	Name of	corporation - mus	st include suffix		-
Dear Sir or Madam:					
The enclosed "Applicat "Certificate of Existenc above referenced foreig	e," or "Certificate of	f Good Standing"	rization to Transact Busin and check are submitted t Florida.	ess in Florida," o register the	
Please return all corresp	ondence concerning	this matter to the	e following:		
Maria Mondello					
		Name of Persor	n	2021	_
MLMBooks				<b>2024 OC</b> SECTO	
<del></del>		Firm/Company			See See
5264 NE 6th Ave . 18B				/ C) <b>TI</b>	_ <del>       </del>
		Address			-;·
Oakland Park, FL 33334				2:2 STAI	400
		City/State and Zip	code	m; "W -	-
mlm8138@gmail.com					_
	E-mail address: (	to be used for fut	ure annual report notificat	ion)	
For further information	concerning this mat	ter, please call:			
Maria Mondelle	o a1	954	579-1619		
Name of Perso	n	Area Code	Daytime Telephone No	ımber	
Registration Se Division of Cor The Centre of T	rporations Fallahassee ee Street, Suite 810		MAILING ADDRES Registration Section Division of Corporati P.O. Box 6327 Tallahassee, FL 3231	ons	
Enclosed is a check for Please make check payable \$70.00 Filing Fee	the following amounts to: FLORIDA DEP  \$78.75 Filing  Certificate of	Fee & $\square$ \$78.	.75 Filing Fee & 🔲 💲 tified Copy	87.50 Filing Fee, Certificate of Status Certified Copy	s &

## 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.

ast Marketing Inc.				
orporation; must include "INCORPORA orp," "Inc," "Co," or "Corp.")	TED," "(	COMPANY," "CORPORATION	1,"	
able in Florida, enter alternate corporate	name ador	nted for the numose of transacting	o business in Florida)	
New York		26-4616977		
(State or country under the law of which it is incorpora		(FEI number, if applicable)		
6/02/2009				
(Date of incorporation)		(Date of duration, if other than perpetual)		
8/1/24 Expected is 10/15/2024				
nd Road, Miller Place, NY 11764 (Princip	oal office s	treet address)		
			<b>20</b> 2	
(Current	mailing ac	ddress, if different)	2024 OCT	
<u>et address</u> of Florida registered agent	: (P.O. B	ox NOT acceptable)	28 28	
Maria Mondello		_	OF S	
5264 NE 6th Ave 18B			2: 23 STATE S.F.L	
Fort Lauderdale		, Florida 33334		
(City)		(Zip code)		
	orporation; must include "INCORPORATORP," "Inc," "Co," or "Corp.")  able in Florida, enter alternate corporate rk  y under the law of which it is incorporate 6/02/2009  of incorporation)  8/1/24 Expected is 10/15/2024  (Date first transacted busi (SEE SECTIONS 607.1501 & nd Road, Miller Place, NY 11764  (Principal Current Maria Mondello)  5264 NE 6th Ave 18B  Fort Lauderdale	orporation; must include "INCORPORATED," "Corp," "Inc," "Co," or "Corp.")  able in Florida, enter alternate corporate name adoption in Florida, enter alternate corporate name adoption in Florida (See Section Sectio	preparation; must include "INCORPORATED," "COMPANY," "CORPORATION orp," "Inc," "Co," or "Corp.")  Able in Florida, enter alternate corporate name adopted for the purpose of transacting the series of transacting transacting transacting transacting transacting transacting transacting transacted business in Florida, if prior to registration (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liabiliting transacting	

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.

□Chairman	Name: Latricia /1510	□Chairman	Name:	
□Vice Chairman	Name: Latricia Tiriro Address: 45 Woodland Road	□Vice Chairman	Address:	
□Director	Miller Place NY 11764	Director		
■ President	Patricia Tirico	□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		0 2
Secretary	☐Treasurer	Secretary		Treasu g
Other	Other	Other		(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c
⊡Chairman	Name:	□Chuirman	Name:	2: 23 STATE
	Address:	□Vice Chairman		
☐ Director		□Director		
□President		□President		
		□ Vice President		
Secretary	Treasurer	Secretary		□Treasurer
Other		Other		Other
individuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Dep	artment of State Annual R	ed for reporting eport form.	g purposes only. Non-indexe
14	Signature of Dire	ctor or Officer	<del></del>	<u> </u>

s.817.155, F.S.

#### STATE OF NEW YORK

### DEPARTMENT OF STATE

#### Certificate of Status

I, WALTER T. MOSLEY, 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 assumed name information is reflected:

Entity Name:

NORTH EAST MARKETING INC.

DOS ID Number:

3800760

Entity Type:

DOMESTIC BUSINESS CORPORATION

Assumed Name:

SUBSCRIPTION SERVICES

Assumed Name ID Number:

419864

Assumed Name Status:

**ACTIVE** 

Date of Initial Filing of Assumed Name:

06/02/2009

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 September 18, 2024 at 03:57 P.M.

Brandon C Higher

WALTER T. MOSLEY Secretary of State

BRENDAN C. HUGHES

Executive Deputy Secretary of State

Authentication Number: 100006604642 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>



October 15, 2024

MARIA MONDELLO 5264 NE 6TH AVE- B FORT LAUDERDALE, FL 33334 US

SUBJECT: NORTH EAST MARKETING INC

Ref. Number: W24000122344

We have received your document for NORTH EAST MARKETING INC . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Must list an address for the President "Patricia Tirico".

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon Operations Manager A

Letter Number: 924A00022781

Mahans updated

RECEIVED
OCT 28 2024

www.sunbiz.org





August 28, 2024

MARIA MONDELLO 5264 NE 6TH AVE- B FORT LAUDERDALE, FL 33334 US

SUBJECT: NORTH EAST MARKETING INC

Ref. Number: W24000122344

We have received your document for NORTH EAST MARKETING INC and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a llc, but your entity is a corporation. Please complete and return the enclosed blank form(s).

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Ariel Jones Regulatory Specialist II

www.sunbiz.org

Letter Number: 824A00019326