

F16000000489

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

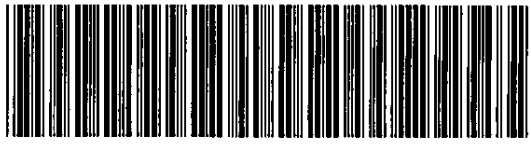
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:  
  
RA  
RA+ Sign W16-1982

Office Use Only



100280350031

01/07/16--01023--013 \*\*70.00

FILED  
2016 FEB -2 PM 2:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER

FEB - 3



RECEIVED

2016 FEB -2 PM 1:16

FLORIDA DEPARTMENT OF STATE  
Division of Corporations  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

January 13, 2016

PETER HOESEL  
SARATOGA SUNDRESS COMPANY INC.  
P.O. BOX 402  
SARATOGA SPRINGS, NY 12866

SUBJECT: SARATOGA SUNDRESS COMPANY INC.  
Ref. Number: W16000001982

We have received your document for SARATOGA SUNDRESS COMPANY INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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) 245-6051.

Karen A Saly  
Regulatory Specialist II

Letter Number: 116A00000821

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SARATOGA SUNDRESS COMPANY INC.  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

PETER HOESEL  
Name of Person

SARATOGA SUNDRESS COMPANY  
Firm/Company

PO BOX 402  
Address

SARATOGA SPRINGS NY 12866  
City/State and Zip code

benefits@nycap.rr.com  
Email address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PETER HOESEL at ( 518 ) 583-9200  
Name of Person Area Code Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified 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.

1. SARATOGA SUNDRESS COMPANY INC  
(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)

2. NEW YORK 3. 26-4639705  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. \_\_\_\_\_ 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 493 BROADWAY SARATOGA SPRINGS NY 12866  
(Principal office address)

P.O. Box 402 SARATOGA SPRINGS NY 12866  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Peter Hoessel

Office Address: 13499 S. CLEVELAND AVE STE A-213

FORT MYERS, Florida 33907  
(City) (Zip code)

2016 FEB -2 PM 2:59  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA  
FILED

**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.*

P. Hoessel  
(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: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**B. OFFICERS**

President: PETER HOESEL

Address: 493 BROADWAY

SARATOGA SPRINGS NY 12866

Vice President: SAME

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: SAME

Address: \_\_\_\_\_  
\_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. *Peter Hoesel*

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. *Peter Hoesel*

(Typed or printed name and capacity of person signing application)

**FILED**  
2016 FEB -2 PM 2:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

State of New York } ss:  
Department of State

I hereby certify, that the Certificate of Incorporation of SARATOGA SUNDRESS COMPANY INC. was filed on 03/26/2009, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



FILED  
2016 FEB -2 PM 3:00  
SECRETARY OF STATE  
FALL HAVEN, FLORIDA

\*\*\*

*WITNESS my hand and the official seal of the Department of State at the City of Albany, this 04th day of January two thousand and sixteen.*

*Anthony Scardino*

Executive Deputy Secretary of State