

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000246494 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007 : (702)866-2500

Fax Number : (702)866-2689

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

Email Address:

FOREIGN PROFIT/NONPROFIT CORPORATION FASTER FASTER, INC.

Certificate of Status	0	
Certified Copy	0	
Page Count	04	,-,-,
Estimated Charge	\$70.00	
	· ·	150 E

Electronic Filing Menu

Corporate Filing Menu

Help

S Warren

Amber

COVER LETTER

		ration Sec on of Corp						
SUBJEC	ጉ ጥ•	FASTER	FASTER, INC	•				
o o Dij Di			Name	of corporation	- must ii	nclude suffix		
Dear Sir	or Ma	ıdam:						
"Certifies	ate of	Existence	on by Foreign Co ;" or "Certificate a corporation to t	of Good Star	iding" an	d check are sub		siness in Florida," ed to register the
Please re	turn e	ıll corresp	ondence concern	ing this matte	r to the fo	ollowing:		
				Amber Ra	gland			
				Name of	Person			<u> </u>
				InCorp Serv	ices, Inc			
				Firm/Con				
			3773 Hov	vard Hughes	Pkwy · :	Suite 500S		
				Addr				
			La:	s Vegas, NV	89169-6	014		
	_			City/State a	nd Zip c	ode	•	
				ocuments@i				
			E-mail addres	s: (to be used	for future	annual report	notifi	cation)
For furth	er inf	ormation	concerning this n	natter, please	call:			
Ragiand	on t	ehalf of In	Corp Services, Inc.	at (246-	2677		
	Name	of Person	1	Area Cod	le	Daytime Telep	hone	Number
F I C 2	Regist Divisi Clifton 1661	ration Seconor on of Corp n Building	porations Center Circle	s:		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ectio orpor 7	n ations
Enclosed	is a	check for t	the following am	ount:				·
\$70.0	O Fili	ng Fee	S78.75 Filin Certificate			Filing Fee & ed Copy	ß	\$87.50 Filing Fee, Certificate of Status & Certified Copy

H160002464943

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.

•	STER, INC.		
(Enter name of c	orporation; must include "INCORPORATED," ' orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORA	TION,"
, ,			
	able in Florida, enter alternate corporate name ad	opted for the purpose of trans	sacting business in Florida)
California	3	2 7.408395	2
	y under the law of which it is incorporated)	27- 408395- (FEI number,	if applicable)
10/28/2010		Perpetual	
·	of incorporation)	(Date of duration, if	other than perpetual)
Upon Filing			
-	(Date first transacted business in F		
185 Valley D	(SEE SECTIONS 607.1501 & 607.150) rive, Brisbane, CA 94005	z, r.s., to determine penalty	naonity)
'		1 - 0° 11 1	
	(Principal	office address)	
	(Comput malling	address (Edifferent)	
	(Current mailing	address, if different)	
Name and street	•		ro Co
. Name and stree	et address of Florida registered agent: (P.O.		
. Name and stree	et address of Florida registered agent: (P.O. InCorp Services, Inc.		
Name:	et address of Florida registered agent: (P.O.		
Name:	et address of Florida registered agent: (P.O. InCorp Services, Inc. 17888 67th Court North	Box <u>NOT</u> acceptable)	
Name:	et address of Florida registered agent: (P.O. InCorp Services, Inc. 17888 67th Court North	Box <u>NOT</u> acceptable)	I E D
Name:	et address of Florida registered agent: (P.O. InCorp Services, Inc. 17888 67th Court North Loxanatchee (City)		
Name: Office Address: . Registered ag	et address of Florida registered agent: (P.O. InCorp Services, Inc. 17888 67th Court North	Box NOT acceptable) , Florida 33470 (Zip code)	IL ED A 9-54 THE STATE A
Name: Office Address: Registered aglaving been names	et address of Florida registered agent: (P.O. InCorp Services, Inc. 17888 67th Court North Loxanatchee (City) ent's acceptance: and as registered agent and to accept services application, I hereby accept the appointment	Box NOT acceptable) , Florida 33470 (Zip code) e of process for the above ant as registered agent and	stated corporation at the plad agree to act in this capacity
Name: Office Address: Registered aglaving been namesignated in this	et address of Florida registered agent: (P.O. InCorp Services, Inc. 17888 67th Court North Loxanatchee (City) ent's acceptance: and as registered agent and to accept service application, I hereby accept the appointment omply with the provisions of all statutes reliable.	Box NOT acceptable) , Florida 33470 (Zip code) e of process for the above ant as registered agent and calletive to the proper and calletive	stated corporation at the plad agree to act in this capacity implete performance of my
Name: Office Address: Registered agilaving been namelesignated in this	et address of Florida registered agent: (P.O. InCorp Services, Inc. 17888 67th Court North Loxanatchee (City) ent's acceptance: and as registered agent and to accept services application, I hereby accept the appointment	Box NOT acceptable) , Florida 33470 (Zip code) e of process for the above ant as registered agent and calletive to the proper and calletive	stated corporation at the plad agree to act in this capacity implete performance of my
Name: Office Address: Registered aglaving been namesignated in this	et address of Florida registered agent: (P.O. InCorp Services, Inc. 17888 67th Court North Loxanatchee (City) ent's acceptance: and as registered agent and to accept service application, I hereby accept the appointment omply with the provisions of all statutes reliable.	Box NOT acceptable) , Florida 33470 (Zip code) e of process for the above ant as registered agent and calletive to the proper and calletive	stated corporation at the plad agree to act in this capacity implete performance of my

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
Address: Too valley Drive
Brisbane CA 94005 → ±
Vice President:
Address:
Secretary: Derek Dorresteyn
Address: 185 Valley Drive, Brisbane, CA 94005
Treasurer: Jeff Sand
Address: 185 Vailey Drive, Brisbane, CA 94005
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
12. 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.
Marc Daniel Fenigstein, President

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

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME:

FASTER FASTER, INC.

FILE NUMBER:

C3329940

FORMATION DATE:

10/28/2010

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of September 23, 2016.

ALEX PADILLA
Secretary of State

NP-25 (REV 01/2015)

MAR