

APPLICATION FOR RENEWAL OF FICTITIOUS NAME

REGISTRATION# G00105900423

Fictitious Name: NORTON TOOL

FILED
Aug 19, 2015
Secretary of State
G15000085982

Current Mailing Address:

5775 ORANGE DR
DAVIE, FL 33314

New Mailing Address:

Current County of Principal Place of Business:

BROWARD

New County of Principal Place of Business:

Current FEI Number:

59-2727801

New FEI Number:

Current Owner(s):

Document #: () Delete
FEI #:
Name: NORTON, RALPH E
Address: 5101 SW 163 AVE
City-St-Zip: FT LAUDERDALE, FL 33331

Document #: () Delete
FEI #:
Name: NORTON, PENELOPE G
Address: 5101 SW 163 AVE
City-St-Zip: FT LAUDERDALE, FL 33331

Additions/Changes to Owner(s):

Document #: () Change () Addition
FEI #:
Name:
Address:
City-St-Zip:

Document #: () Change () Addition
FEI #:
Name:
Address:
City-St-Zip:

I the undersigned, being an owner in the above fictitious name, certify that the information indicated on this form is true and accurate. I understand that the electronic signature below shall have the same legal effect as if made under oath. I am 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, Florida Statutes.

RALPH NORTON

08/19/2015

Electronic Signature(s)

Date

Certificate of Status Requested ()

Certified Copy Requested ()